

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

04624

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F98000001199

1. Corporation Name

AMERICAN ROBOT TECHNOLOGIES, INC.

American Robot Technologies, Inc.

Principal Place of Business

17105 SAN CARLOS BLVD., STE A6151
FORT MYERS BEACH FL 33901

Mailing Address

17105 SAN CARLOS BLVD., STE A6151
FORT MYERS BEACH FL 33901

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99 SEP 17 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



6/24/99 90015 012 \$550.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		03/02/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0530259	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip		Zip		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No	
24		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
ROBISON, LINDA R 3849 W. GULF DR., #103 SANIBEL FL 33957				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DELETE ☐	1.1 TITLE	D ☐ Change ☒ Addition
NAME	WEISEL, WALTER	1.2 NAME	Hunt, David
STREET ADDRESS	6824 DANIELS COURT	1.3 STREET ADDRESS	871 S. Town & River Drive
CITY-ST-ZIP	FORT MYERS FL	1.4 CITY-ST-ZIP	Fort Myers, FL 33919
TITLE	DELETE ☐	2.1 TITLE	D ☐ Change ☒ Addition
NAME	BROOKS, SANDRA	2.2 NAME	Messer, Joseph S.
STREET ADDRESS	296 BROADVIEW DRIVE	2.3 STREET ADDRESS	6800 Haywood Drive
CITY-ST-ZIP	FORT MYERS FL	2.4 CITY-ST-ZIP	Vicksburg, MI 49097
TITLE	DELETE ☐	3.1 TITLE	D ☐ Change ☒ Addition
NAME	WEISEL, CONSTANCE L	3.2 NAME	Murphy, John
STREET ADDRESS	6824 DANIELS COURT	3.3 STREET ADDRESS	P.O. Box 529
CITY-ST-ZIP	FORT MYERS FL	3.4 CITY-ST-ZIP	Harwich, MA 02645
TITLE	DELETE ☐	4.1 TITLE	D ☐ Change ☒ Addition
NAME	JOHNSON, LEROY	4.2 NAME	Robison, Robert
STREET ADDRESS	104 S. ADELAIDE	4.3 STREET ADDRESS	6450 Pine Avenue
CITY-ST-ZIP	FENTON MI	4.4 CITY-ST-ZIP	Sanibel, FL 33957
TITLE	DELETE ☒	5.1 TITLE	☐ Change ☐ Addition
NAME	WEISEL, CONNIE (same as above)	5.2 NAME	
STREET ADDRESS	6824 DANIELS COURT	5.3 STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS FL	5.4 CITY-ST-ZIP	
TITLE	DELETE ☐	6.1 TITLE	☐ Change ☐ Addition
NAME	STOESSER, RICHARD	6.2 NAME	
STREET ADDRESS	5120 RUSSELLE STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIDLAND MI	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Katherine Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 7, 1999

1-941-416-0488
Daytime Phone #

KE

CR2E034 (11/98)