

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$350 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # F98000002910

1. Corporation Name

AZERTY INCORPORATED

Principal Place of Business

13 CENTRE DRIVE  
ORCHARD PARK NY 14127-2291

Mailing Address

13 CENTRE DRIVE  
ORCHARD PARK NY 14127-2291

FILED

99 OCT 20 PM 4:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/21/1998

4. FEI Number

16-1187791

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MAIKISCH, FRANK  
11200 N.W. 25TH STREET, STE 101  
MIAMI FL 33172

10. Name and Address of New Registered Agent

B1 Name Alfredo Mantilla  
B2 Street Address (P.O. Box Number is Not Acceptable)  
Beacon Tradeport  
B3 11200 N.W. 25th St. - Suite 101  
B4 City Miami FL B5 Zip Code 33172

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 Alfredo Mantilla  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE 7/23/99

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETED
C	LARRIMORE, RANDY	2200 E GOLF ROAD	DES PLAINES IL	<input checked="" type="checkbox"/>
P	DROMETER, BILL	13 CENTRE DRIVE	ORCHARD PARK NY	<input checked="" type="checkbox"/>
V	SCHWARTZ, STEVE	2200 E GOLF ROAD	DES PLAINES IL	<input type="checkbox"/>
V	ROWSEY, MICHAEL	2200 E GOLF ROAD	DES PLAINES IL	<input checked="" type="checkbox"/>
V	BUSHELL, DANIEL	2200 E GOLF ROAD	DES PLAINES IL	<input type="checkbox"/>
VS	HALLEEN, OTIS	2200 E GOLF ROAD	DES PLAINES IL	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP	Change	Addition
VT	JAMES A. PRIBEL	2200 E GOLF ROAD	DES PLAINES IL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
P	RICHARD HEDIGER	13 CENTRE DRIVE	ORCHARD PARK NY	<input type="checkbox"/>	<input checked="" type="checkbox"/>
400003032514				<input type="checkbox"/>	<input type="checkbox"/>
-11/02/99--01051--016				<input type="checkbox"/>	<input type="checkbox"/>
****750.00				<input type="checkbox"/>	<input type="checkbox"/>
V	KATHLEEN S. DVORAK	2200 E GOLF ROAD	DES PLAINES IL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
V	SUSAN MALONEY MEYER	2200 E GOLF ROAD	DES PLAINES IL	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/15/99

(716) 662-0200

CR2E034 (5/99)