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PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G01985

SYMBOLD, INC.

FILED Feb 02, 1999 8:00am Secretary of State

02-02-1999 90018 035 ***150.00

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Principal Place	e of Business	Ma	ailing Address					+ 1884111 EBIT 88181 1	18181 (<u>9</u>		9:31: 3 3 3	#11 #1	QIDU IDB T	
2028-3 EASTBOURNE WAY ORLANDO FL 32812			28-3 EASTBOURNE WAY LANDO FL 32812					ו סם	NOT WRI	TE IN THIS	S SPACE			
							09,	e Incorporated or /30/1982	-					
Principal Place of Business 1			2a. Mailing Address 26					4. FEI Number Applied 59-2229673 Not App.					Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5, Cer	tifcate of Status D	Desired Seried \$8.75 Additional Fee Required					
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees							
Zip Country			Zip Counti				1	s corporation owersonal Property Ta	rporation owes the current year Intangible al Property Tax. ☑ Yes ☐				□No	
	9. Name and Address of Curre	nt Regis	tered Agent		T		10. Na	me and Address	of New F	Registerec	l Agent			
		\			81	Name								
2028	BOLD, JOHN 3 EASTBOURNE WAY				82	Street Ad	idress (P.O. I	Box Number is Ne	ot Accepta	able)	pr. +(3_ *			
ORL	ANDO FL 32812				83							1		
l					84	City			. 4	FI		Zip Co		
11. Pursuant	to the provisions of Sections 607.05	02 and 6	07.1508, Florida Statut	es, the a	bove	-named co	orporation sut	bmits this stateme	ent for the	purpose o	f changing	its re	egistered	
office or n	egistered agent, or both, in the State im familiar with, and accept the obligi	e of Florications of,	aa. Such change was a , Section 607.0505, Flo	iutnonzec rida Stati	a by i tutes.	tne corpora	ation's board	of directors, their	eny accer	or trie appe	Jiiillient a	s regi	316160	
	, , ,													
SIGNATURE													[
SIGNATURE	Signature, typed or printed name of registered age		<u>''</u>	: Registered			uired when reinsta			DATE				
12.	OFFICERS AI		CTORS	: Registered	Agent			ting) HTIONS/CHANGE	S TO OF					
12.	OFFICERS AI		<u>''</u>	13.	Agent				S TO OF		ND DIREC		RS IN 12	
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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 arrattachment with an address. The first plant of the corporation of the corporation of the corporation 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 arrattachment with an address.

SIGNATURE:

AND TYPED OR BRATTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECTOR DATE OF DATE DESCRIPTION OF SIGNING OFFICER OR DIRECTOR DIRECTO

(2E034 (11/98)