Applied For Not Applicable

Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90038 017 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G619 1. Corporation Name PROXITRONIC U.S.A., INC.	001					
Principal Place of Business	Mailing Address					
1420 GOLF TERRACE DRIVE TALLAHASSEE FL 32301 US 1420 GOLF TERRACE DRIVE TALLAHASSEE FL 32301 US			DO NOT WRITE IN THIS SPACE			
			3. Date Incorporated or Qualifed 09/30/1983			
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	26		59-2327200	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	, \$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 24 25	Zip Co 29 30	ountry	This corporation owes the current year leading Personal Property Tax.	☐ Yes ☑No		
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
MCKENZIE, BRIGITTE R 1420 GOLF TERRACE		81 Name M 82 Street Addre	ICKENZIENGY POS (P.O. Box Number is Not Abdeptable)	Jr		
TALLAHASSEE FL 32301		83	7			
		84 City Ta	lighassee F	- <u> 0 </u>		
office or registered agent, or both, in the	77.0502 and 607.1508, Florida Statutes, the State of Florida. Such change was authoriz obligations of, Section 607.0505, Florida St.	ed by the corporation	ration submits this statement for the purpose on's board of directors. I hereby accept the appoint	of changing its registered ointment as registered		

ig its registered as registered 1466

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Re	gistered Agent signature n	equived when reinstating)	DATE	1 1 1 1 1	
12.	OFFICERS AND DIRECTORS		13.		GES TO OFFICERS		
TITLE	Р	DELETE	1.1 TITLE	Ρ.,		☐ Change	Addition
NAME	MCKENZIE, BRIGITTE R		1.2 NAME	McKenzie	<u> W</u> . Goy :] ም.	
STREET ADDRESS	1420 GOLF TERRACE DRIVE		1.3 STREET ADDRESS	1430 Bolf]	ichedie!	10 V	
CITY-ST-ZIP	TALLAHASSEE FL 32301		1.4 CITY-ST-ZIP	Tallahacs	te FL 3	3230L	
TITLE	VP	DELETE	2.1 TITLE	VPV Sec,	0. 1.14	Change □	Addition
NAME	FUNK, WOLFGARN W		2.2 NAME	Mc Kenzie,	Brigitte	16.	ĺ
STREET ADDRESS	1031 BAYPONT MARRIOTT, MARINA VILLA		2.3 STREET ADDRESS	1420 Bort	Terrace	_ 0/	
CITY-ST-ZIP	PANAMA CITY BEACH FL 32404		2. 4 CITY-ST-ZIP	Tallahasse	e 1-6 0	32301	
TITLE		☐ DELETE	3.1 TITLE		•	Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP			<u> </u>	
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP		=	4.4 CITY+ST-ZIP				
TITLE		☐ DELETE	51 TITLE			¹ ☐ Change	Addition
NAME			52 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6 3 STREET ADDRESS				
CITY-ST-ZIP	•		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:

an. 4, 1999