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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H01272

(4)

FILED Mar 20 1998 8:00am Secretary of State

, AIL	IED SYMBOL TECHNOLOG	GY, INC.				
Principal Pi	ace of Business	Mailing Address				83811 81811 81811 81811 81811 81811 1981
C/O MICHAEL R. NYS 2859 N. MILLER DR. PALM BCH GRONS FL 33410-1129  C/O MICHAEL R. NYS 2859 N. MILLER DR. PALM BCH GRONS FL 33410-1129  PALM BCH GRONS FL 33410-1129			33410-1129		DO NOT WRITE II  3. Date Incorporated or Qualified	N THIS SPACE
					04/27/1984	ì
2. Principa	l Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2503915	Not Applicable
Suite, A	pt. #, etc.	Suite, Apt. #, etc.				\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & S	tale	City & State			6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28     Zip	Count	D.		Added to Fees
24	25	29	30	ıy	8. This corporation owes or has paid Personal Property Tax due June 3	
	9. Name and Address of Cu		1301		10. Name and Address of New Regi	
	NYS, MICHAEL R.		8	1 Name		
	2859 N. MILLER DR.		8	9 Street Addr	ess (P.O. Box Number is Not Acceptable	<del></del>
	PALM BCH GRONS FL 33410		ľ	Siree Addi	ess (r.o. box Number is Not Acceptable	7)
			8	3		
			8	4 City		85 Zip Code
						FL
11. Pursua	nt to the provisions of Sections 607	.0502 and 607.1508, Florida Statu	ites, the abo	ve-named corp	oration submits this statement for the purion's board of directors. I hereby accept	rpose of changing its registered
agent.	I am familiar with, and accept the o	bligations of, Section 607.0505, Fi	lorida Statut	es.	toris board or directors. Thereby accept	the appointment as registered
SIGNATUR						
	Signature typed or printed name of registere	d agent and title if applicable. (NO AND DIRECTORS		gent signature require		DATE
12. TITLE			13			
	אח ו				ADDITIONS/CHANGES TO OTHICE	RS AND DIRECTORS IN 12
	DP NYS MICHAFI B	DELETE	1.1 TITLE	ſ	ADDITIONS OF AN OCCUPANT	Change Addition
NAME	NYS, MICHAEL R.		1.1 TITLE 1.2 NAME	:	ADDITIONS OF ANOLOGICAL PROPERTY OF A PARTY	
NAME Street Addres	NYS, MICHAEL R. 2859 N. MILLER DR.		1.1 TITLE 1.2 NAME 1.3 STREE	ET ADDRESS	ADDITIONS OF ANOLES TO OFFICE	
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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 an attachment with an address.

SIGNATURE:

Will Relie

MICHARA R. L. NYS Whereh 15,1868 S61-775-3874