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

FILED Apr 27 1998 8:00am Secretary of State

1. Corporatio	MENT # H8669 NOLOGY PRODUCTS, INC.	2 (1)			NATA 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Principal Plac	ee of Business	Mailing Address			BIEN DIDI BIBN BIBN BIDI IDDI
3040 SW 10TH STREET POMPANO BEACH FL 33069		3000 34TH ST SOUTH B-105 ST PETERSBURG FL 33711		DO NOT WRITE IN THIS SPACE	
		US		3. Date Incorporated or Qualified	
6 Drivers of C	Was a of Dunis and	La lateriore according		11/20/1985	
······································		2a. Mailing Address 26		4. FEI Number	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2594568	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6, Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip	Country	This corporation owes or has paid the Personal Property Tax due June 30.	
	9. Name and Address of Currer		~	10. Name and Address of New Registe	
НА	VENS, RICHARD B		81 Name		
3000 34TH ST S			82 Street Adde	ress (P.O. Box Number is Not Acceptable)	
STE 8-105					
ST	PETERSDBURG FL 33711		83		
			84 City		85 Zip Code
44 10	And the second of the second o	a			FL 69 Zip code
office or a agent I a	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was a attions of, Section 607,0505, Flor attions of, Section 607,0505, Flor	s, the above-harned corp. Ithorized by the corporation of the statutes.	poration submits this statement for the purpor tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE	Signature, typed or proded name of rejudered ap-	et met tele d'acoli able (NOT)	Registered Agort signature requir	red wher roinstaling) DA	TF
12,	OFFICERS AN	and the second s	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELETE	1.1 TOTLE		Change Addition
NAME	HAVENS, BARBARA M		1.2 NAME		
STREET ADDRESS	3000 34TH ST S STE B-105		1.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		1.4 CITY - ST - ZIP		
TITLE	DP	DITE	2.1 TITLE		Change Addition
NAME	HAVENS, RICHARD B.		2.2 NAME		
STREET ADDRESS	3000 34TH ST S STE B-105		2.3 STREET ADDRESS		
CITY+ST-ZIP TITLE	\$T. PETERSBURG FL	DULLTE	2. 4 C(TY - S1 - Z(P 3.1 TITLE		Change Addition
NAME		bearing	3.2 NAME		T Asserted T Linguistics
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE	-	Doriete	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		والمعالج المنافق	4.4 CITY-ST-ZIP		
TITLE		DEFLE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP		DELETE	5.4 CRY-S1-7IP		Change Addition
TITLE NAME			61 TITLE		LT CHANGE LT AUGILION
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP	Land the file in the state of t	at this films does not a wife for	■ 64 City-S1-ZiP	Costing 110 07(0)(i) Florida Statutas I further	a postify that the information

Thereby cortiny that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the informatio 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 eath; that I am an officer or director of this 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.