

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Minkham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **J35344**

(7)

1. Corporation Name

PHOENIX RESOURCE TECHNOLOGIES, INC.

Principal Place of Business

**% WILFRIED H. MEYBOHM
2122 FUNSTON ST.
HOLLYWOOD FL 33020**

Mailing Address

**% WILFRIED H. MEYBOHM
2122 FUNSTON ST.
HOLLYWOOD FL 33020**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**MEYBOHM, WILFRIED H.
2122 FUNSTON ST.
HOLLYWOOD FL 33020**

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 601.04(1)(a) and 601.04(1)(b), 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 601.04(1)(a), Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Agent/Secretary

Date

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

**PST
MEYBOHM, WILFRIED H.
2122 FUNSTON ST.
HOLLYWOOD FL**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

☐ DELETE

13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, ST., ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, ST., ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, ST., ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, ST., ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, ST., ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST., ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, ST., ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing is true and correct. 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 registered agent or both, 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 added with an address.

SIGNATURE:

WILFRIED H. MEYBOHM
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/17/96 (954) 925-1373

CR2E034 (12/95)