FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90108 027 ***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

DOCUM 1. Corporation	MENT # J54526							
BLASTER TAG, INTERNATIONAL, INC.								
Principal Place	of Business	Mailing Address				- 1 ÎNBRÎNA BIBU BUNÎ BIBE BUNE NDUB BAN BYAN		iibii didii idei
8762 LAKE TIBET CT 8762 LAKE TIBET COUR			URT					
ORLANDO FL 3		ORLANDO FL 32836				DO NOT WRITE IN THIS	SPACE	
US		US				3. Date Incorporated or Qualifed	OF ACE	
						01/27/1987		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	<u>-</u>	plied For
21		26				65-0108885	 	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		
City & State	P	City & State				6. Election Campaign Financing	\$5.00	May Be
23	-	28				Trust Fund Contribution	,	to Fees
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year In		_
24	25	29	30			Personal Property Tax.	X Yes	□No .
	9. Name and Address of Current	t Registered Agent		04		10. Name and Address of New Registered	Agent	
1 57/5	INTHAL DON			81	Name			
LEVENTHAL, RON 8762 LAKE TIBET COURT				82	Street Add	dress (P.O. Box Number is Not Acceptable)		
ORLANDO, FL				83	_			_
ORLANDO, TE ORLANDO FL 32836				"				
0110 a 12 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				84	City	FI	85 Zip	Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligated in the state of the colligated in the state of the colligated in the state of the colligated in the state of the provision of the provisio	of Florida. Such change w ions of, Section 607.0505	as authorized , Florida Stat	i by utes	the corporat	rporation submits this statement for the purpose o tion's board of directors. I hereby accept the appo	f changing its intment as re	gistered
	Signature, typed or printed name of registered agen			l Ager	nt signature requir	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIDECTO	DE IN 12
12.	OFFICERS AN	D DIRECTORS	13. E 1.1 TI	TI E		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	pri i		1.7 to					
NAME					T ADDRESS			
STREET ADDRESS	ANI ANIMA PI				T-ZIP			
CITY-ST-ZIP				TLE	1-211		☐ Change	☐ Addition
NAME	LEVENTHAL, JACQUELINE C.			AME				
STREET ADDRESS	5601 WINDHOVER DRIVE		2.3 S	TREE	TADDRESS			
CITY-ST-ZIP	ORLANDO FL			2. 4 CITY-ST-ZIP				
TITLE	· ·	☐ DELET	E - 3.1 T	TLE			. Change	. Addition
NAME			3.2 N	AME				{
STREET ADDRESS	,		3.3 S	TREE	TADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·			ST-ZIP		Channa	☐ Addition
TITLE		☐ DELET					☐ Change	Addition
NAME			4.21			V		ļ
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP					T-ZIP		☐ Change	Addition
TITLE		_ 50001	5.2 N		İ		_ ,	
NAME STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP					iT-ZIP			
TITLE		☐ DELET	E 6.1 T	TLE			Change	Addition
NAME			6.2 N	AME				

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 or an attachment with an address, with allother like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS