

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1998



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 APR -9 AM 9:22

HC 4113

**FILING FEE** Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
**\$ 188.75** Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address  
of Limited Liability Company

**DOCUMENT #** L95000000998

ORLANDO TECHCENTER, L.L.C.  
1400 E. NEWPORT CENTER DRIVE  
SUITE 209  
DEERFIELD BEACH FL 33442

1a. Principal Place of Business Address

1400 E. NEWPORT CENTER DRIVE  
SUITE 209  
DEERFIELD BEACH FL 33442

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

3a. State of Formation

12/26/1995

FL

4. FEI Number

☐ Applied For

☐ Not Applicable

65-0632700

5. Date of Last Report

6. Certificate of Status Desired

03/10/1997

\$8.75 Additional Fee Required ☒

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

KAY, JAMES R  
2000 PALM BEACH LAKES BOULEVARD  
SUITE 1002  
WEST PALM BEACH FL 33409

Name

JAMES R. KAY

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

777 So. FLASLER DRIVE, EAST TOWER

Suite, Apt. #, etc.

Suite 900

City

W

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

400002488284-3

-04/14/98 -01062-022

SIGNATURE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

DATE \*\*\*\*197.50 \*\*\*\*197.50

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	ACKERMANS, UTA	HOCHSTRASSE 12, D-47877	WILLICH-SCHIEFBahn,
MGR	HAHN, ULRICH	HOCHSTRASSE 12, D-47877	WILLICH-SCHIEFBahn,
MGR	Markus Völkel	" "	" "
MGR	GUENTHER REIBLING	1400 E. Newport Center Drive	Deerfield Beach FL.
MGR	LORENZ REIBLING	1400 E NEWPORT CENTER DR.	33442 DEERFIELD BEACH FL 33442

11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

MGR.

4/6/98

954-428-4010