

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

FILED
May 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M29037 (2)
1. Corporation Name
CASE TECHNOLOGIES CORPORATION

Principal Place of Business
5951 BAYVIEW DRIVE
#209
FT. LAUDERDALE FL 33308-2739

Mailing Address
195 CHADWICK RD.
TEANECK NJ 07665-4205
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 195 CHADWICK RD.		03/18/1986	
22 City & State		27 TEANECK NJ		4. FEI Number	
23 Zip		28 07666-4205		22-3424088	
24 Country		29 DEAGENT		5. Certificate of Status Desired	
				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CHATTERTON, ADRIANE 5951 BAYVIEW DRIVE #209 FT. LAUDERDALE FL 33308		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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when

Adriane Chatterton
195 Chadwick Rd
Teaneck, NJ 07666-4205

DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13.	
TITLE	D	1.1 TITLE	D
NAME	CHATTERTON, ADRIANE	1.2 NAME	CHATTERTON, ADRIANE
STREET ADDRESS	195 CHADWICK RD	1.3 STREET ADDRESS	195 CHADWICK ROAD
CITY - ST - ZIP	TEANECK NJ	1.4 CITY - ST - ZIP	TEANECK NJ 07666-4205
TITLE	P	2.1 TITLE	P
NAME	CHATTERTON, ALICIA	2.2 NAME	CHATTERTON, ALICIA
STREET ADDRESS	195 CHADWICK RD.	2.3 STREET ADDRESS	195 CHADWICK ROAD
CITY - ST - ZIP	TEANECK NJ	2.4 CITY - ST - ZIP	TEANECK NJ 07666-4205
TITLE	C	3.1 TITLE	C
NAME	CHATTERTON, KEITH	3.2 NAME	CHATTERTON, Keith
STREET ADDRESS	195 CHADWICK RD.	3.3 STREET ADDRESS	195 CHADWICK ROAD
CITY - ST - ZIP	TEANECK NJ	3.4 CITY - ST - ZIP	TEANECK NJ 07666-4205
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/98

973-783
8000

CR2E034 (10/97)