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

DOCUMENT #

(0)

WARREN TECHNOLOGY, INC.

Principal Place of Business Mailing Address

2050 WEST 73RD ST. HIALEAH FL 33016-1816

2. Principal Place of Business

21

2a. Mailing Address

26

2050 WEST 73RD ST. HIALEAH FL 33016-1816

FILED Jan 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

3. Date Incorporated or Qualified 12/17/1986

62-0564863

4. FEI Number

City & State	22	#, etc.	-	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired	
Trust Fund Contribution		te						6. Election Campaign Financing		\$5.00	May Bo	
24 25 29 30 Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent KELLEY, WINFIELD L. 1581 BRICKELL AVE. MIAMI FL 33129 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, 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 reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE KELLEY, WINFIELD L. 12 NAME SIREET ADDRESS CITY- ST-ZIP MIAMI FL 1.3 STREET ADDRESS CITY- ST-ZIP LOCKARD LO	23	28					Trust Fund Contribution					
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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		Certify that the information supplied with	h this filing do	es not qualify fo				ection 119 07(3)(i) Florida Statutes I	further co	rtify 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.

305-556-6933