

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

FILED  
Jul 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # M69980 (4)</b> 1. Corporation Name <b>NOVATEC CONSULTANT AND INVESTMENT, INC.</b>			
Principal Place of Business <b>6366 EDGE O GROVE ORLANDO FL 32819</b>		Mailing Address <b>6366 EDGE O GROVE ORLANDO FL 32819</b>	
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 <b>PASCAL, SURKY 6366 EDGE O GROVE STE L1 ORLANDO FL 32819</b>		10. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS			
TITLE	D	<input type="checkbox"/> DELETE	
NAME	DE BOECK, JEAN-MARIE		
STREET ADDRESS	380 CUMBERLAND ST		
CITY-ST-ZIP	ENGELWOOD NJ		
TITLE	D	<input type="checkbox"/> DELETE	
NAME	DE RECK, ANNE-MARIE		
STREET ADDRESS	65 B. CHEMIN DE BAS-RANS		
CITY-ST-ZIP	1328 OHAIN, BELGIUM		
TITLE	DPST	<input type="checkbox"/> DELETE	
NAME	DE BOECK, JEAN-MARIE		
STREET ADDRESS	380 CUMBERLAND ST		
CITY-ST-ZIP	ENGELWOOD NJ		
TITLE	D	<input checked="" type="checkbox"/> DELETE	
NAME	DRAZGA, EDMUND A		
STREET ADDRESS	608 44TH AVE E, L1		
CITY-ST-ZIP	BRADENTON FL		
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME			
6.3 STREET ADDRESS			
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.			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>02/18/1988</b>	
4. FEI Number <b>59-2873338</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

SIGNATURE:

JM DE BOECK

June 20 1998

CR2E034 (10/97)