

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P02847** (2)
1. Corporation Name
TESTERION, INC.



Principal Place of Business
**1220 VILLAGE WAY
SANTA ANA CA 92705**

Mailing Address
**1220 VILLAGE WAY
SANTA ANA CA 92705**

3. Date Incorporated or Qualified
07/26/1984

3a. Date of Last Report
03/27/1995

4. FEI Number
95-3624404

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**MONDOUX, CHRISTOPHER A
5740 S. SEMORAN BLVD
ORLANDO FL 32822**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 the person designated as registered agent)

(NOTE: Registered Agent Signature required when not filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	MATSCHOS, HARALD	
STREET ADDRESS	1220 VILLAGE WAY	
CITY - ST - ZIP	SANTA ANA CA 92705	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	HILL, WILLIAM G.	
STREET ADDRESS	1220 VILLAGE WAY	
CITY - ST - ZIP	SANTA ANA CA 92705	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MANG, PAUL	
STREET ADDRESS	1220 VILLAGE WAY	
CITY - ST - ZIP	SANTA ANA CA 92705	
TITLE	P	<input type="checkbox"/> DELETE
NAME	MANFRED STRAUSS	
STREET ADDRESS	1220 VILLAGE WAY	
CITY - ST - ZIP	SANTA ANA CA 92705	
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. TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME		
3. STREET ADDRESS		
4. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME		
7. STREET ADDRESS		
8. CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
9. TITLE	P D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
10. NAME	MANFRED STRAUSS	
11. STREET ADDRESS	1220 VILLAGE WAY	
12. CITY - ST - ZIP	SANTA ANA, CA 92705	
13. TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
14. NAME	RANDALL WILTSHIRE	
15. STREET ADDRESS	1220 VILLAGE WAY	
16. CITY - ST - ZIP	SANTA ANA, CA 92705	
17. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME		
19. STREET ADDRESS		
20. CITY - ST - ZIP		

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/3/96

DATE

CR2E034 (12/95)