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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED** 

Apr 30 1997 8:00am

Secretary of State

Addition

DOCUMENT # P02847

TESTERION, INC.

TITLE

NAME

STREET ADDRESS

Principal Place of Business Mailing Address 1220 VILLAGE WAY 1220 VILLAGE WAY SANTA ANA CA 92705 SANTA ANA CA 92705-4750 3a. Date of Last Report 3. Date Incorporated or Qualified 07/26/1984 06/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 95-3624404 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zφ 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MONDOUX, CHRISTOPHER A 5740 S. SEMORAN BLVD 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32822 83 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 little if applicable (NOT): Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) DELETE Change Addition TITI F 11 THUE MATSCHOS, HARALD NAME 1.2 NAME 1220 VILLAGE WAY STREET ADDRESS 13 STREET ADDRESS SANTA ANA CA CITY-ST-ZIP 14 CITY - ST - ZIP 🔀 DELETÉ Addition TITLE PĎ 21 TITLE STRAUSS, MANFRED NAME 22 NAME 1220 VILLAGE WAY STREET ADDRESS 2.3 STREET ADDRESS SANTA ANA CA 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MANG, PAUL 1220 VILLAGE WAY STREET ADDRESS 3.3 STREET ADDRESS SANTA ANA CA 92705 CITY-ST-ZIP 34. CITY - ST - ZIP DELETE ... Change Addition TITLE 4.1 TITLE WILTSHIRE, RANDALL 4. 2 NAME STREET ADDRESS 1220 VILLAGE WAY 4.3 STREET ADDRESS SANTA ANA CA CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE PRESIDENT | DIRECTOR HARALD FRANKENBACH NAME 5.2 NAME 220 VILLAGE WAY STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY+ST-ZIP DELETE ☐ Change

14. Loo 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 by 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 I am an officer or directly 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 of Block 13 if changed, or on an attachment with an address. n 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 eath, that by of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name

6.1 TITLE

6.2 NAME

**6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP