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CORPORATION ANNUAL REPORT

1996



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

DOCL	JMENT	#	P2	639	4

1. Corporation	MENT # P263 9 TA TECHNOLOGIES, INC.	` '				ani Biği ğiği Biği Biği Giğa Bi	dis distribució educa
Principal Place	of Business	Mailing Address				IIS ONOS OSBAS DIBIO BSON DA	II GIBN DIDII IDDI
1120 HOPE R SUITE 150 ATLANTA GA US		1120 HOPE RD Suite 150 Atlanta ga 30350 US			3. Date Incorporated or Qualified	3a. Date of Last I	•
2, Principal Pla	ce of Business	2a. Mailing Address			10/10/1989 4. FEI Number	03/28/19	Applied For
1	og of business	26			58-1621248		Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional Required
Crty & State		City & State		•••	Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip	Country	Zip	Coun	try	8. This corporation has liability for		s 199.032
24	25	29	30			s 🔲 No	
	9. Name and Address of Curre	ent Registered Agent		81 Name	10. Name and Address of New	Registered Agent	
THE DO	-	OVOTELL NIO	[
	ENTICE-HALL CORPORATION LYS STREET	SYSTEM INC.	[1	Street Add	dress (P.O. Box Number is Not Accepta	ible)	
SUITE 1			-	83			
	ASSEE FL 32301		L				
I GII DHI	700/LL L 0200		1	B4 City		FL 85 2	Zip Code
				1 '			
11. Pursuant to	o the provisions of Sections 607.05 od agent, or both, in the State of Flo n, and accept the obligations of, Se	orida. Such change was authori oction 607.0505, Florida Statute	ized by the co s.	e-named corpor poration's box	oration submits this statement for the po and of directors. I hereby accept the app	urpose of changing its pointment as registere	registered office od agent. I am
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or suppremental annual report is true and accurate and that my signature shall have the same legal effect as if made under bit the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name altachasen with an address. oath; that I am an officer or director of appears in Block 12 or Block 13 if ch

SIGNATURE: