## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999

**DOCUMENT #** 1. Corporation Name



HORIZONS TECHNICAL SERVICES COMPANY, INC.

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FLORIDA DEPARTMENT OF STATE

FILED Aug 24, 1999 8:00 am Secretary of State 08-24-1999 90012 022 \*\*\*550.00

Principal Place of Business Mailing Address									114611687111671					
700 TECHNOLOGY PARK DR.				C/O THE CORPORATION TRUST COMPANY										
BILLERICA MA 01821			_	1209 N. ORANGE ST.										
US				WILMINGTON DE 19801 US					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified					
			00					3	06/07/1990	or Qualified				
2. Principal Place of Business				2a. Mailing Address				4	i, FEI Number				Applied For	
21				26					<u>33-0284941</u>				Not Applica	ble
Suite, Apt. #, etc.				Suite, Apt. #, etc.					Certificate of State	is Desired			5 Additional	
22			27							<u> </u>		Fee	Required	
City & State			Ci	City & State					<ol><li>Election Campaig</li></ol>	n Financing			<b>00</b> May Be	ļ
23			28						Trust Fund Contribution Added to Fees					
Zip	Country			Zip Cou			ountry		8. This corporation owes the current year					
24	25		29						Intangible Personal Property. Yes No					
9. Name and Address of Current F				tegistered Agent			10. Name and Address of New Registered A				agent		-	
CT	CORPORATIO	N SYSTEM				81	Name							İ
CT CORPORATION SYSTEM 1200 S. PINE/ISLAND ROAD							Street A	Address	(P.O. Box Number is	Not Accepta	ible)			
PLANTATION FL 33324												····		<b>-</b>
						83							l	
• • • • • • • • • • • • • • • • • • •							City		FL 85 Zip C				Zip Code	
11. Pursuant	to the provision	s of sections 607 0502	2 and 607 1	508 Florida Statut	es, the at	MV8-	named co	corporatio	n submits this statem	ent for the pu		anging it:	s registered	
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.														
-		and accept the obliga	MONS OF, SE	ection 607.0505, Fi	UI WA SIA	mes	•							
SIGNATURE	Signature, typed or pr	rinted name of registered agen	gent signatur	ıre required v	when reinstating)		DATE			ء				
12. OFFICERS AND							3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	D			DELETE	1.1 TI	TLE		Da	vid CCIC	upp v	1P [	Chan	ge 🛂 Addi	tion (66/4)
NAME	BOYCE, J.P	) <u>.</u>		1.2 N		AME	E 176		o Technoli	Val. Pr	PKD	rive	>	F034
STREET ADDRESS	3990 RUFF	in Rd.		1.3 ST		3 STREET ADDRESS		700	o jednick		U(			Į Ę
CITY-ST-ZIP	SAN DIEGO	) CA 🕝		1.40			CITY-ST-ZIP		<u>llerica v</u>	VA			/	
TITLE	DVS			DELETE 2.1 TO		1.1 TITLE		A	osistant.	secre	lanı [	Chan	ge 🛂 Addi	tion
NAME	VAUGHAN,	ROBERT L.		2.2			2.2 NAME		Chanill Barr ).					
STREET ADDRESS	700 TECHN	iology=park dr^		2.35		2.3 STREET ADDRESS -		2	3033 Science Park Road					İ
CITY-ST-ZIP	BILLERICA	MA		2.4		2.4 CITY-ST-ZIP		1	an Diego	Ca	العبحة			
TITLE	D			DELETE 3.1			I.1 TITLE				1212	Chan	ge 🗌 Addi	tion
NAME	PALMER, J	ames t.		3.2			.2 NAME							-
STREET ADDRESS	3990 RUFF			3.3			3.3 STREET ADDRESS							
CITY-ST-ZIP	SAN DIEGO	) CA		3.4			3.4 CITY-ST-ZIP							
TITLE	T			DELETE	4.1 TI	TLE			_		1	Chan	ge 🔲 Addi	tion
NAME	HILLMER, V				4.2 N	AME	{	1						-
STREET ADDRESS	3990 RUFF			,	4.3 S	TREET	ADDRESS							
CITY-ST-ZIP	SAN DIEGO	CA			4.4 C	ITY-ST	-ZIP							
TITLE	AS			DELETE	5.1 Ti	TLE	Ţ					Chan	ge 🗌 Addi	tion
NAME	MARINELLI,				5.2 N	AME.	1	1						- }
STREET ADDRESS		iology park dr.			5.3 \$	TREET	ADDRESS							
CITY-ST-ZIP	BILLERICA				5.4 C	ITY-ST	-ZIP							
TITLE	DP (3) (§	0.003%		DELETE	6.1 T	TLE				<del></del>	_[	Chan	ge 🔲 Addi	tion
NAME	PONTIUS, I				6.2 N	AME	ļ	{						}
STREET ADDRESS	700 TECHN	IOLOGY PARK DR			6.3 \$	TREET	ADDRESS							
CITY-ST-ZIP	BILLERICA	MA		_	6.4 C	ITY-ST	-ZIP							
44 15			Alara Pilia	4	L		-4-4 :-		440.07/2\/i\ Elavido (	Canalian Lar	الار بالأناء محمد محمد	Lat the in	-formation	

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.

GARAGUEL REGREGAL BEACH

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR