

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

**FILED**  
**Apr 23, 1999 8:00 am**  
**Secretary of State**

04-23-1999 90008 042 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P31826**

1. Corporation Name  
**PURADYN FILTER TECHNOLOGIES INCORPORATED**

Principal Place of Business 3020 HIGH RIDGE RD STE 100 BOYNTON BCH FL 33426 US	Mailing Address 3020 HIGH RIDGE RD STE 100 BOYNTON BCH FL 33426 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

3. Date Incorporated or Qualified <b>11/19/1990</b>	Applied For Not Applicable
4. FEI Number <b>14-1708544</b>	
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**FORD, RICHARD**  
**4720 S. OCEAN BLVD.**  
**HIGHLAND BCH. FL 33487**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b> 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: *Richard Ford* (NOTE: Registered Agent signatures required when reinstating) DATE: **4/15/99**

12. OFFICERS AND DIRECTORS

TITLE	<b>D Chairman + CEO</b> <input type="checkbox"/> DELETE
NAME	<b>FORD, RICHARD</b>
STREET ADDRESS	<b>4720 S. OCEAN BLVD.</b>
CITY-ST-ZIP	<b>HIGHLAND BCH. FL 33487</b>
TITLE	<del>RTSD</del> <input checked="" type="checkbox"/> DELETE
NAME	<del>HART, KEITH</del>
STREET ADDRESS	<del>525 N.W. 79TH WAY</del>
CITY-ST-ZIP	<del>PARKLAND FL 33067</del>
TITLE	<del>D</del> <input checked="" type="checkbox"/> DELETE
NAME	<del>SOROS, ROBERT</del>
STREET ADDRESS	<del>888 7TH AVE.</del>
CITY-ST-ZIP	<del>NEW YORK NY 10106</del>
TITLE	<del>D</del> <input checked="" type="checkbox"/> DELETE
NAME	<del>HITTLE, BRADLEY</del>
STREET ADDRESS	<del>37 BEDFORD RD.</del>
CITY-ST-ZIP	<del>GREENWICH CT 06831</del>
TITLE	<del>President CEO</del> <input type="checkbox"/> DELETE
NAME	<del>ALAN SANDLER</del>
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>Chairman + CEO</b> <input checked="" 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 checked="" type="checkbox"/> Addition
5.2 NAME	<b>President and COO</b>
5.3 STREET ADDRESS	<b>Alan J. Sandler</b>
5.4 CITY-ST-ZIP	<b>21621 Magdalena Terr</b>
5.4 CITY-ST-ZIP	<b>Boca Raton, FL 33433</b>
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, with all other like empowered.

SIGNATURE: *Alan Sandler* (NOTE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) DATE: **4/20/99** DAYTIME PHONE #: **561-542-9959**

CR2E034 (11/98)