

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

FILED

Apr 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P32376** (6)

1. Corporation Name
C E R TECHNOLOGIES, INC.

Principal Place of Business

**80 KANE ST., STE. A-4
WEST HARTFORD CT 06119**

Mailing Address

**80 KANE ST., STE. A-4
WEST HARTFORD CT 06119**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 122 East Bell Avenue		26 122 East Bell Avenue		12/28/1990	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		06-1300725	
City & State		City & State		Applied For	
23 Altoona, PA		28 Altoona, PA		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 16602-5231		29 16602-5231		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25 Blair		30 Blair		Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
26		31		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
27		32		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**SHAW, RENE
132 N BLVD COURT
DELAND FL 32720**

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

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	1.1 TITLE	
NAME	RONCO, EUGENE	1.2 NAME	
STREET ADDRESS	80 KANE ST., STE. A-4	1.3 STREET ADDRESS	122 East Bell Avenue
CITY-ST-ZIP	WEST HARTFORD CT	1.4 CITY-ST-ZIP	Altoona, PA 16602-5231
TITLE	V	2.1 TITLE	
NAME	THOMPSON, RAYMOND	2.2 NAME	
STREET ADDRESS	80 KANE ST, STE A-4	2.3 STREET ADDRESS	122 East Bell Avenue
CITY-ST-ZIP	WEST HARTFORD CT	2.4 CITY-ST-ZIP	Altoona, PA 16602-5231
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: *Raymond D. Thompson, Jr.* Raymond D. Thompson, Jr. 4-17-98 814-943-0996

CR2E034 (10/97)