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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Mar 27 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000000867 (1)

TECHNOLOGY RESOURCES GROUP, INC.

İ						
Principal Place of Business		Mailing Address		- 100014001 440 IDITO 11401 DATE \$4191 40514 DATE	MANIL MANAL CALID BENIN LABOR 1881	
1875 WALKER AVE WINTER PARK FL 32789		PO BOX 2147 WINTER PARK FL 32790-2147		DO NOT WRITE IN TH	IIG CDACE	
US		US			3. Date Incorporated or Qualified	IS STACE
	-				10/28/1992	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3149734	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registers	ed Agent
BAI	rtuska, george e			81 Name		
1875 WALKER AVE				82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
NIW	iter park fl 32789					
				83		
				64 City	F	85 Zip Code
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obli	te of Florida. Such change w	v a s authorized	by the corporati	oration submits this statement for the purpose ion's board of directors. I hereby accept the a	of changing its registered appointment as registered
SIGNATURE		•				
	Signature, typed or printed name of registered a			Agent signature require		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D DELETE		1			☐ Change ☐ Addition
NAME	BARTUSKA, GEORGE E		1.2 NA			
STREET ADDRESS	1875 WALKER AVE			EET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789	Locuste		Y-ST-ZIP		Observe D 44400-
TIFLE	☐ DELETE					Change Addition
NAME			2.2 NA			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		Drifte		Y-ST-ZIP		Change Addition
TITLE		∐ DELETE				Change Addition
NAME			3.2 NA			
STREET ADORESS				EET ADORESS		
CITY-ST-ZIP TITLE		DELETE		Y-ST-ZIP		☐ Change ☐ Addition
				1		C custific C vancion
NAME			4. 2 NA			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		DELETE		/-ST-ZIP		Change Addition
TITLE		C Deceit		1		The custon
NAME OTOGET ADDRESS			5.2 NAI	1		
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		DELETE		r-ST-ZIP		Change Addition
TITLE		☐ Nett it				CT change CT Manifold
NAME			6.2 NA	1t		

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.

6.4 CITY - ST - ZIP

63 STREET ADDRESS