FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P92000010780 (4) **DOCUMENT #**

SPHERE TECH., INC.

SPHERE TECH., INC.				
Principal Place of Business	Mailing Address	(185/186) 116 1811 1811	III AGIII BEIN BOIGH HEN SEN NOOS	
1202 BRIGADOON DRIVE CLEARWATER FL 34619	1202 BRIGADOON DRIVE CLEARWATER FL 34619			
	US	Date incorporated or Qualifi	ed 3a. Date of Last Repor	rt .
		12/07/1992	04/03/1995	<u> </u>
P. Direct Disease of Chairman	L 2a Mailing Address	4. FEI Number	Арр	lled For

					12/07/1992	04/03/1995
2.	Principal Place of Bus	siness	2a. Mailing Addres	S	4. FEI Number 59-3162117	Applied For Not Applicable
21	Suite, Apt. #, etc.		26		5. Certificate of Status Dosired	\$8.75 Additional Fee Required
22	City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Zıp	Country 25	7ip	Country 30	8. This corporation has liability for in Florida Statutes Yes	□ No
24			irrent Registered Agent		10. Name and Address of New Re	egistered Agent
	Baker, Eliza 1202 Brigado	Beth A		L.,	Address (P.O. Box Number is Not Acceptable	е)
	CLEARWATER			83 84 Oty		FL 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.

SIGNATURE Signative typerforms and name of reputation epict or throughput and OFFICERS AND DIRECTORS		CTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
ITLE	PDS	[] DELETE	1 1 THE	Cnange	Additio
AME	BAKER, ELIZABETH A.		1.2 NAME		
TREET ADORESS	1202 BRIGADOON DRIVE		1.3 STREET ADDRESS		
ITY-ST-ZIP	CLEARWATER FL		14 CHY ST-ZIP		
TLE	VTD	☐ DELETE	2 1 11ftF	Criange	Addition
AME	CSATARY, MARIKA		2.2 NAME		
TREET ADDRESS	1202 BRIGADOON DRIVE		2.3 STHEET ADDRESS		
ITY-ST-ZIP	CLEARWATER FL		2.4 CiTY - ST ZIF		
TLE		☐ DELETE	3 1 10115	☐ Change	Addition
AME			3.2 NAME		
TREET ADDRESS			3.3 STREET ADDRESS		
DTY - ST - ZIP			3.4 CHY+ST+ZIP	F1.0	- Nation
ITLE		☐ DELETE	4 1 TITLE	Change	Add tie
AME			4.2 NAM:		
STREET ADDRESS			4.3 STHEET ADDRESS		
DITY-ST-ZIP			4.4 City St. ZiP		<u> </u>
ITLE		[] DELETE	5 1 THLF	Change	Add ti
IAME			5.2 NAME		
TREET ADDRESS			5.3 STREET ADDRESS		
ITY - ST - ZIP			5.4 CINY - ST - ZIP		
11.6		☐ DELETE	6 1 THILE	Change	☐ Addit
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY CT 7/0			: 64 CITY - \$7 - ZIP		

14. If do hereby certify that the information supplied with this fring is voluntarily furnished and shes not qualfy for the exemption stated in Section 119.07(3)(d), Florida Statutes. I further certify that the information indicated on this airmusil report or supplemental airmusil report is true and accurate and that my senature shall have the same legal effect as if made undercently that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 15 if changed or on an attachment with an address.

ELIZABETH A SELEN ELIZABETH A BELLEY SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/96 813-797-9193