

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90240 017 \*\*\*150.00

DOCUMENT # P92000015018

1. Corporation Name:  
MICROCOSM, INC.



Principal Place of Business  
112 WATER TURKEY CT.  
DAYTONA BEACH FL 32119

Mailing Address  
112 WATER TURKEY CT.  
DAYTONA BEACH FL 32119

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
1 4513 RING NECK RD.  
Suite, Apt. #, etc.  
2 City & State  
3 ORLANDO, FL  
Zip Country  
4 32808 25 USA  
2a. Mailing Address  
26 4513 RING NECK RD.  
Suite, Apt. #, etc.  
27 City & State  
28 ORLANDO, FL  
Zip Country  
29 32808 30 USA

3. Date Incorporated or Qualified  
12/23/1992  
4. FEI Number  
59-3156946  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required  
6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees  
8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

LOPEZ, RICHARD T  
112 WATER TURKEY CT.  
DAYTONA BEACH FL 32119

10. Name and Address of New Registered Agent

81 Name RICHARD T. LOPEZ  
82 Street Address (P.O. Box Number is Not Acceptable)  
4513 RING NECK RD.  
83  
84 City ORLANDO FL 85 Zip Code 32808

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

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
P	LOPEZ, RICHARD T	112 WATER TURKEY CT	DAYTONA BCH FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP	Change	Addition
P	LOPEZ, RICHARD T.	4513 RING NECK RD.	ORLANDO, FL 32808	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

4. 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 registered agent 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 attached report with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD T. LOPEZ

3/1/99

407.772.0270

CR2E034 (11/98)