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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000010135 (0)

9. Name and Address of Current Registered Agent

MERLIN TECHNOLOGY, INC.

GONZALEZ, AVELINO J 667 TUSCORA DR

WINTER SPRINGS FL 32708

Principal Place of Business Mailing Address 115 BAYTREE COURT 115 BAYTREE COURT WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708-5122 3a. Date of Last Report 3. Date Incorporated or Qualified 02/10/1993 03/27/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 59-3167308 21 26 Suite Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country Z_{10} Zio 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes 🔀 No 24 30 25 29

83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this studement for the purpose of changing its registered agent, or both in the State of Jorida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam furnishment, and accept the obligations of Section 607.0505, Florida Statutes. 84

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(NOTE: Hagistered Agent's gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE X Change Presiden 1.1 TITLE GONZALEZ, AVELINO J Avelino-J. 12 NAME NAME 667 TUSCORA DR 1.3 STREET ADDRESS STREET ADDRESS WINTER SPRINGS FL 32708 1.4 CITY-ST-ZIP CHY-ST-7iP ☐ Change DELETE Addition 21 TITLE TITLE MAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS 011Y-\$1-74P 2.4 CITY-ST-ZIP DELETE Change 3.1 TITLE Addition TITLE **3.2 NAME** STREET ACCRESS 3.3 STREET ADDRESS CITY ST- ZIP 3.4. CITY-51-ZIP DELETE Change 41 TITLE Addition TIBLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS CHTY: ST-ZIE 4.4 CITY - ST- ZIP DELETE 5.1 TITLE Change Addition THE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY: ST. 7IF DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME

14. I do 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

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

STREET ADURESS CITY-S1-ZIP

(407)-696-2565

FILED

Jan 27 1997 8:00am

10. Name and Address of New Registered Agent

Secretary of State

CR2E034

Applied For

Not Applicable