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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000015188

YARNALI	L DATA SYSTEMS, INC.				
Principal Place	e of Business	Mailing Address			
1590 EAST AVENUE N P.O. BOX 1647 SARASOTA FL 34237 SARASOTA FL 34230				DO NOT WRITE IN TH	HIS SPACE
		US		3. Date Incorporated or Qualifed	110 01 710 11
	,			03/01/1993	;
2. Principal Pl	lace of Business	2a. Mailing Address	***	4. FEI Number .	Applied For
21		26		65-0395531	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State	e	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 the current year	Intangible
24	25	29	30	Personal Property Tax.	☐ Yes ☑ No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Register	ed Agent
VANI	DROFF, LEONARD		81 Name		
) EAST AVENUE N		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	ASOTA FL 34237		83		. ,
QAI U	AOOTA TE OTEST		63		
	•		84 City	F	
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu	tes, the above-named corp	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its registered
agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	ations of, Section 607.0505, Flo	orida Statutes.	on's board of directors. Thereby decept the up	political do Coglotto
SIGNATURE					
				O.TE	
40	Signature, typed or printed name of registered age	· · · · · · · · · · · · · · · · · · ·	E: Registered Agent signature require		
12.	OFFICERS A	ND DIRECTORS	13.	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	
TITLE	OFFICERS AF	· · · · · · · · · · · · · · · · · · ·	13. 1.1 TITLE	se when following)	AND DIRECTORS IN 12
TITLE NAME	OFFICERS AND VANDROFF, LEONARD	ND DIRECTORS	13. 1.1 TITLE 12 NAME	se when following)	AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	OFFICERS AND VANDROFF, LEONARD 1590 EAST AVENUE, N	ND DIRECTORS	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS	se when following)	AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND VANDROFF, LEONARD	ND DIRECTORS	13. 1.1 TITLE 12 NAME	se when following)	AND DIRECTORS IN 12
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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 changes, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP