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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DOCUM	996	0067953 (8)		ATIONS		
1. Corporation Na	ECHNOLOGY CORPORA	•	,		T TREATERS THE NAME THAT RAIN BATT	HI BARKI DEKIR OKIN IBBID KOMA BILES KHI KRII
Principal Place of	Business	Mailing Address	··· - ····			
1203 - S.E 9TH		1203 S.E. 9TH TERR.				
SUITE 102		SUITE-102				
CAPE CORAL FL 33990 US		CAPE CORAL FL 33990 US		3. Date incorporated or Qualified 09/23/1993	3a. Date of Last Report 02/01/1995	
2. Principal Place	of Business	2a. Mailing Address		-	4. FEI Number	Applied For
Suite, Apt. #, 6		Suite, Apt. #, etc			76-0414913	Not Applicable \$8.75 Additional
2 1017.1		L	E 1	7th Ave	5. Certificate of Status Desired	Fee Required
Oty & State	and FL	City & State	/	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
20 000	Country	Zip	p	ntry	8. This corporation has liability for	r intangible tax under s 199.032,
4 3379	U 25 USA	29 33990	30	USA		s No
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New	negistered Agent
SAUNDER	S. DAVE			82 Street Addr	ess (P.O. Box Number is Not Accepta	ahla)
1203 S.E. 9TH TERR.				95	60 Moody Rd.	# 126
SUITE 100				83	ð	
GAPE CO	PAL-FL 3399 0			84 City //	et m	FI 85 Zp Code 3
11. Pursuant to t	he provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the abo	ive-named corpor	ration submits this statement for the pard of directors. I hereby accept the app	urpose of changing its registered office
SIGNATURE	at inc. typics or printed name of registered agen OFFICERS AN	tand title da, pricative (NOT IDID:RECTORS	E: Registered	Agent signature require	d when reinstaling)	DATE FICERS AND DIRECTORS IN 12
THE	D Saunders, Dave	☐ DELETE	1.11			Change Addition
NAME STREET ACIDRESS	4000 DOVER		1.2 N	TREET ADDRESS		
C-1Y-S1-7/P	HOUSTON TX 77087		1	TY-SI-ZIP		
Titt	D	DELETE	2 1 1			Change Addition
NAME.	SAUNDERS, BEVERLY		2 2 N	AME		
STREET ADDRESS	4000 DOVER			IREET ADDRESS		
CITY \$1-7P	HOUSTON TX 77087	☐ DELFTE	2 4 C	TY-ST-ZIP		Change Addition
NAMI			3 1 N			E Change E Addition
STHEET ACCORESS				TREET ADDRESS		
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30,€		DEFEIF	4 1 1	līLF		Change 🔲 Addition
NAME.			42 N	AME		
STELLET ADDRESS				TREET ADDRESS		
CHY ST ZIP		DELETE	44 C 5 1 I	11 Y - S1 - ZIP		☐ Change ☐ Addition
NAM!			5 2 N			
S REFEARINGS				THEET ADDRESS		
CITY ST ZIF				1TY - \$1 - ZIP		
TITLE		☐ DELFTE	6 1 7		The second secon	Change Addition
NAMI			62 N	AME		
STREET ACCRESS			63\$	TREET ADDRESS		
CHY ST-7IP	Care falls and Estate for a second	mand at the lates and the lates of the lates		rty - ST - ZiP	for the enematics stated in Partial at	O OZ/OVIA) Florido Diol dos 14 des-
certify that th	æriny mai the information supplied ie information indicated on this and	wiri this filing is voluntarily furni Jual report or supplemental annu	sneu and ial report	uces not quality t is true and accura	for the exemption stated in Section 119 ate and that my signature shall have th	e same legal effect as if made under

1/19/96 (713)649-8302 Daytone Prope 8