

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB 14 PM 12:46

DOCUMENT # P93000086644 (0)

1. Corporation Name  
DATA TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
3151 SW 14 PL BAY 9 BOYNTON BEACH FL 33426	3151 SW 14 PL BAY 9 BOYNTON BEACH FL 33426

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		12/20/1993	04/20/1994
22 State, Apt. #, etc.		27 State, Apt. #, etc.		4. FEI Number	Applied For
23 City & State		28 City & State		65-0460248	Not Applicable
24 Zip		29 Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 Country		30 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Jeffery WAIT, JEFFREY-H 3151 SW 14 PL BAY 9 BOYNTON BEACH FL 33426				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				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. 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 re-registered) DATE:

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD Jeffery	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WAIT, JEFFREY-H	12 NAME			
STREET ADDRESS	3473 GONDOLIER WAY	13 STREET ADDRESS			
CITY - ST - ZIP	LANTANA FL 33462	14 CITY - ST - ZIP			
TITLE	VP	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	Christine Wait	22 NAME			
STREET ADDRESS	3473 Gondolier Way	23 STREET ADDRESS			
CITY - ST - ZIP	Lantana FL 33462	24 CITY - ST - ZIP			
TITLE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		32 NAME			
STREET ADDRESS		33 STREET ADDRESS			
CITY - ST - ZIP		34 CITY - ST - ZIP			
TITLE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		42 NAME			
STREET ADDRESS		43 STREET ADDRESS			
CITY - ST - ZIP		44 CITY - ST - ZIP			
TITLE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		52 NAME			
STREET ADDRESS		53 STREET ADDRESS			
CITY - ST - ZIP		54 CITY - ST - ZIP			
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		62 NAME			
STREET ADDRESS		63 STREET ADDRESS			
CITY - ST - ZIP		64 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and I declare that equality for the exemption stated in Sections 119.07(3)(b), 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. I am an officer or director of the corporation, the officer 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 in any way from that with an address.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR