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

Mailing Address

BAY 1

US

26

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3151 SW 14TH PLACE

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

**BOYNTON BEACH FL 33426** 

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000086644

Country

9. Name and Address of Current Registered Agent

25

Principal Place of Business

**BOYNTON BEACH FL 33426** 

Suite, Apt. #, etc.

City & State

2. Principal Place of Business

3151 SW 14TH PLACE

21

22

23

24

Zip

DATA TECHNOLOGIES, INC.

FILED Feb 18, 1999 8:00am **Secretary of State** 02-18-1999 90059 009 \*\*\*158.75

|    | DO NOT WRITE IN THIS SPACE    |   |     | 13 |  |
|----|-------------------------------|---|-----|----|--|
| 3. | Date Incorporated or Qualifed | • | - " |    |  |

X

 $\Box$ 

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Пио

Not Applicable

12/20/1993

65-0460248

5. Certificate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

4. FEI Number

WAIT, JEFFERY Street Address (P.O. Box Number is Not Acceptable) 82 3151 SW 14TH PLACE BAY 1 83 **BOYNTON BEACH FL 33426** 85 84 City 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. (NOTE: Registered Agent signature requir reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE 1.1 TITLE ાં મુક્તિ પર્વેષ TITLE 1.2 NAME WAIT, JEFFERY NAME 3473 GONDOLIER WAY 1.3 STREET ADORESS STREET ADDRESS LANTANA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 2.1 TITLE TITLE WAIT, CHRISTINE 2.2 NAME 3473 GONDOLIER WAY 2.3 STREET ADDRESS STREET ADDRESS LANTANA FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change □ DELETE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 51 TITLE TİTLE 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIP CiTY-ST-ZIP ☐ Addition □ DELETE 61 TITLE TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP

Country

30

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 ghangager or on an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)