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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P94000027070**

1. Corporation Name PROXIMAL, INC.	
Principal Place of Business Mailing Address	18711 48116 (1811 18811 88111 18811 8811 1881
11701 BELCHER RD S 11701 BLECHER RD S	
123	W. T. VO 00405
LARGO FL 33773 LARGO FL 33773 DO NOT WRITE	IN THIS SPACE
US US 3. Date Incorporated or Qualifed 04/07/1994	
Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 26 59-3235493	Not Applicable
	\$8.75 Additional Fee Required
27	 -
City & State City & State 6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip Country Zip Country 8. This corporation owes the current 24 25 29 30 Personal Property Tax.	t year Intangible ☑Yes ☐No
9. Name and Address of Current Registered Agent 10. Name and Address of New Rec	pistered Agent
81 Name	
ROSS, RANDALL D 11701 BELCHER RD S 82 Street Address (P.O. Box Number is Not Acceptable)	e)
STE 123	
LARGO FL 33773 84 City	FL 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 pu	rpose of changing its registered
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purposition of the pu	DATE
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 reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS IN 12
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CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

... RAUDALL D. ROSS NAME OF SIGNING OFFICER OR DIRECTOR

1-26-99

727.535·3305