Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90023 017 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P94000057487**

1. Corporation Name

	INFORMATION TECHNOLO									
Principal P ac		Mailing Address								
3801 APPLETOI ORLANDO FL 3		3801 APPLETON WAY ORLANDO FL 32806					DO NOT WR	ITE IN THI	S SPACE	
						3.	. Date incorporated or Qualifect 07/28/1994			
2. Principal P	lace of Business	2a. Mailing Address				4	. FEI Number		Ap	plied For
21		26				$\perp$	59-3256877			Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			n, puss.	5	. Certifcate of Status Desired		\$8.75 A Fee Re	
City & State		City & State				+-	. Election Campaign Financing		\$5.00	
23		28				°	Trust Fund Contribution		Added to	•
Zip	Country	Zip	Coun	itry		8	. This corporation owes the cur	rent year li	ntangible	
24	25	29	30				Personal Property Tax.		Yes	□No
	9. Name and Address of Curren	Registered Agent		<del></del> .		10	. Name and Address of New	Registere	d Agent	
шіТ	ON POREDT E ID			81	Name					
HILTON, ROBERT E JR 3801 APPLETON WAY			1	82	Street Addre	ess (	P.O. Box Number is Not Accept	able)	<del></del> ;	
	ANDO FL 32806		H	83			<del></del>			
0			Ĺ	0.5	ı					
				84	City			F	85 Zip C	Code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligation of the section of the sec	of Florida, Such change was tions of, Section 607.0505, Fl	authorized orida Statui	by tes	the corporation	nso	poard of directors. I hereby acce	pt the app	or changing its pintment as rec	gistered
12.		I() DIRECTORS	13.	\gen	a signature required	Wildi	ADDITIONS/CHANGES TO O	FICERS	ND DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 TITL	.E			<u> </u>	·	Change	Addition
NAME	HILTON, ROBERT E JR		1.2 NAA	Æ						
STREET ADDRESS	DOOR ADDICTION WAY		1.3 STREET ADDRESS		ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32806		14 CITY-ST-ZIP		T-ZIP					
TITLE		☐ DELETE	2 1 TITL	E					☐ Change	Addition
NAME			2.2 NAM	Æ						Ì
STREET ADDRE 3S	RE3S			2.3 STREET ADDRESS			<u></u>		<del></del>	
CITY-ST-ZIP		☐ DELETE	2. 4 CIT 3.1 TITL		T-ZIP				Change	Addition
TITLE		[] SELETE	1							
NAME				3.2 NAME 3.3 STREET AD						
STREET ADDRESS				34. CITY-ST-						
CITY-ST-ZIP		☐ DELETE	4.1 TITL						Change	☐ Addition
NAME			4, 2 NA	ME		٠				
STREET ADDRE 3S			4.3 STR	REET	ADDRESS					
CITY-ST-ZIP			4 4 CIT	Y- S]	T- ZIP					
TITLE		☐ DELETE	5.1 TITU						Change	☐ Addition
NAME			5.2 NAM							
STREET ADDRE 3S					F ADDRESS					
OUTLY OF THE	I		5.4 CIT	Y - S1	1-218					t

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 recuired 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRE 3S

TITLE

NAME

Change

Addition