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

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90104 022 ***150.00

DOCUMENT # **P94000075501**1. Corporation Name

F.L. TECHNOLOGIES, INC.

	<u>,</u>						
Principal Place of Business Mailing Address					Tidellant tra sayır aratı aratı aratı aratı aratı aratı aratı	Index amon and a	datat tini tani
110 E. BROWARD BLVD., 5TH FLOOR 110 E. BROWARD BLVD., 5TH FORT LAUDERDALE FL 33301 FORT LAUDERDALE FL 3330					DO NOT WRITE IN THIS	CDACE	
					3. Date Incorporated or Qualifed	STACE	
					10/12/1994		
2 Dringing Di	ace of Business	2a. Mailing Address		-	4. FEI Number	Δη.	plied For
—		⊢	7		65-0566097		t Applicable
	1 707 SE 3rd Avenue 26 707 se 3rd Avenue Suite, Apt. #, etc.				05-0300097	\$8.75 A	
22 200	, , ₁				5. Certifcate of Status Desired	Fee Re	
22	City & State City & State			· · · · ·	6. Election Campaign Financing	\$5.00	May Ro
	t Lauderdale, Fla. 28 Fort Lauderda			Fla.	Trust Fund Contribution	Added to	
	Zip Country Zip			,	8. This corporation owes the current year In	tangible	
24 33316 25 USA 29 33316 30					Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
		,	81	Name :			-
MURDOCH, ROBERT E				Street Add	dress (P.O. Box Number is Not Acceptable)		
790 E. BROWARD BLVD.				oli cot Addi	1000 (1.0. Dax Hallings in Hotel Goodman)		
SUITE 400							``
FORT LAUDERDALE FL 33301			-	0.4		85 Zip C	Code
			84	City	FL	_ 85 20 0	Jode
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	,						ļ
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	egistered Age	nt signature require	ed when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	☐ DELETE	1.1 TITLE			Change	Addition
NAME	DREYFUSS, ANDRE		1.2 NAME				1
STREET ADDRESS	·			TADDRESS			
CITY-ST-ZIP	FORT LAUDERDALE FL 33301		1.4 CITY-:	ST-ZIP			□ 4 detti==
TITLE		☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME			2.2 NAME				1
STREET ADDRESS			2.3 STREE	T ADDRESS			
CITY-ST-ZIP			2.4 CITY-	ST-ZIP		Change	☐ Addition
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	*****	□ pri ===	3.4. CITY-	ST-ZiP		☐ Change	Addition
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CITY-ST-ZiP	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	5.4 CITY-	31-211		☐ Change	Addition
TITLE		☐ DELETE	6.2 NAME				L Addition
NAME			1	1			
STREET ADDRESS			•	ET ADDRESS			l
CITY.ST.ZIP 1			6.4 CITY-	SI-ZIP I			1

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 suppliemental 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 organ attachment with an address with all other like empowered.

SIGNATURE:

954-764-1122