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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
Division of Corporations

## DOCUMENT # P95000004475 (6) 1. Corporation Name

LEXONAUT, INC.

SIGNATURE:

| Principal Plac<br>11311 N. 22ND<br>SUITE A-120<br>TAMPA FL 3361 | STREET   | Mailing Address 11311 N. 22ND. STREET SUITE A-120 TAMPA FL 33612-6106 |                |         |                 | T TOURIEST HE LEGIC CHIE CORN CONTRACTOR STORY CONTRACTOR STORY ST |             |  |
|---|--|---|----------------|---------|-----------------|--|-------------|--|
| IAMPA FL 330  | 14   | THMFH TE SSUIZ-VIOC   |                |         |                 | 3. Date Incorporated or Qualified 3a. Date of Last Report 01/18/1995 05/01/1996  |             |  |
| 2. Principal P  | Place of Business  | 2a. Mailing Address   |                |         |                 | 4. FEI Number Applied Fol  | <del></del> |  |
| 21  |  | 26  |                |         |                 | <b>59-3287950</b> Not Applica  |             |  |
| Suite, Apt  | #, etc   | Suite, Apt. #, etc.   |                |         |                 | Certificate of Status Desired     Section  | J           |  |
| Cily & State  | 6  | City & State  |                |         |                 |  |             |  |
| 23  |  | 28  |                |         |                 | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees   |             |  |
| Zip   | Country  | Zip   | Cou            | intry   |                 | 8. This corporation has liability for intangible tax under s. 199.032  | .,          |  |
| 24  | 25   | 29  | 30             | ,       |                 | Florida Statutes Yes No  |             |  |
|   | 9. Name and Address of Curren  | t Registered Agent  |                | 81      | Name            | 10. Name and Address of New Registered Agent   |             |  |
|   | INTRYMAN, JOHN A   |   |                | 0,      | Name            |  |             |  |
|   | 1 NEBRASKA AVE. N.   |   |                | 82      | Street Ad       | ddress (P.O. Box Number is Not Acceptable)   |             |  |
|   | 'E 107<br>2 FL 33549   |   |                | 83      |                 |  |             |  |
| 2012  | . 1 . 55548  |   |                | 04      | Ciby            | los Litro de la  |             |  |
|   |  |   |                | 84      | City            | FL 85 Zip Code   |             |  |
| 11. Pursuant  | to the provisions of Sections 607.050  | 2 and 607.1508, Florida Statut  | tes, the el    | pove    | named co        | corporation submits this statement for the purpose of changing its register<br>oration's board of directors. I hereby accept the appointment as registere  | red         |  |
| agent. La   | egistered agont, or both, in the state<br>im familiar with and accept the obliga   | ations of, Section 607.0505, Fi                                       | orida Stat     | utes    | ine corpo       | oration's board or directors, I nereby accept the appointment as registere   | a           |  |
| SIGNATURE   | 1 m  | tv  |                |         |                 | 4/22/97  |             |  |
|   | Signature typico or princed name of registered age   |   | <del></del>    | d Ager  | it signature re | equired when reinstaling) DATE   |             |  |
| 12.<br>™L€  | OFFICERS ANI   | DELETE  | 13.            | T( E    | <del></del>     | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  | dion        |  |
| NAME  | GOSTA, STENHORN  | L.J Deter   | 1.2 N/         |         |                 | Change Not   | IJŲII       |  |
| STREET ADDRESS  | 11311 N. 22ND. STREET  |   |                |         | ADORESS         |  |             |  |
| CITY - ST - ZIP   | TAMPA FL 33612   |   |                | TY-ST   |                 |  |             |  |
| TITLE   | D  | DELETE  | 2.1 TI         |         |                 | Change Add   | tion        |  |
| NAME  | HOFER, MICHAEL   |   | 2.2 N/         | AME     |                 |  |             |  |
| STREET ADDRESS  | 11311 N. 22ND. STREET  |   | 2.3 ST         | REET    | ADORESS         |  |             |  |
| CHTY - ST - ZIP   | TAMPA FL 33612   |   | 2 4 C          | ITY-S   | T-ZIP           |  |             |  |
| THE   |  | ☐ DELETE  | 3.1 TI         | TLE     |                 | Change Add   | tion.       |  |
| NAME  |  |   | 3.2 N          | AME     | l               |  |             |  |
| STREET ADDRESS  |  |   |                |         | ADDRESS         |  |             |  |
| CHTY - \$1 - ZIP  |  | ☐ DELETE  | 34. C          |         | F-ZIP           | ☐ Change ☐ Addi  | ition       |  |
| TITLE<br>NAME   |  |   | 41 TI<br>4 2 N |         |                 | ☐ cusude ☐ von   | (IOI)       |  |
| STREET ADDRESS  |  |   |                |         | ADDRESS         |  |             |  |
| CITY-ST-ZIP   |  |   |                | TY-\$1  |                 |  |             |  |
| TITLE   |  | DELETE  | 51 TI          | • • • • |                 | Change Addi  | tion        |  |
| NAME  |  |   | 5 2 N/         | AME     | 1               | · · · · · ·  |             |  |
| STREET ADDRESS  |  |   |                |         | ADDRESS         |  |             |  |
| CPY-\$1-7/2   |  |   | 5.4 CI         | TY- ST  | -ZIP            |  |             |  |
| THE   |  | ☐ DELETE  | 61 TI          | TLE     |                 | Change Addi  | tion        |  |
| NAME  |  |   | 62 N/          | AME     | 1               |  |             |  |
| STREET ADDRESS  |  |   | 63 ST          | REET    | Address         |  |             |  |
| CITY-ST-7iP   | and the state of t | ducto this Class deep e   | 64 C           |         |                 | And in Control 440 07/07/0 Charles Control 44 and 44 and 44  |             |  |
| informatio  | on indicated on this annual report or s  | upplemental annual report is t  | rue and a      | accui   | rate and th     | ated in Section 119.07(3)(i), Florida Statutes. I further certify that the that my signature shall have the same legal effect as if made under oath; port as required by Chapter 607, Florida Statutes; and that my name   |             |  |