

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

FILED  
Apr 29 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000008247 (5)  
1. Corporation Name  
HOTOFFICE TECHNOLOGIES, INC.

Principal Place of Business 5201 CONGRESS AVE. CE 232 BOCA RATON FL 33487	Mailing Address 5201 CONGRESS AVE. CE 232 BOCA RATON FL 33487
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/01/1995	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	28	4. FEI Number 65-0555805	Applied For Not Applicable
22 City & State	27	28 City & State	29	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	25 Country	29 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent PADVEEN, STEWART 5201 CONGRESS AVE CE 232 BOCA RATON FL 33487				10. Name and Address of New Registered Agent	

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.		81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
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SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	DIRECTOR (D)
NAME	PADVEEN, STEWART	1.2 NAME	JAMES G. KOLLEGER
STREET ADDRESS	5201 CONGRESS AVE. CE 232	1.3 STREET ADDRESS	5201 CONGRESS AVENUE, C-232
CITY-ST-ZIP	BOCA RATON FL 33487	1.4 CITY-ST-ZIP	BOCA RATON, FLORIDA 33487
TITLE	D	2.1 TITLE	DIRECTOR (D)
NAME	MAJOR, ROBERT	2.2 NAME	OAKLEIGH THORNE
STREET ADDRESS	5201 CONGRESS AVE #CE232	2.3 STREET ADDRESS	5201 CONGRESS AVENUE, C-232
CITY-ST-ZIP	BOCA RATON FL 33487	2.4 CITY-ST-ZIP	BOCA RATON, FLORIDA 33487
TITLE		3.1 TITLE	DIRECTOR (D)
NAME		3.2 NAME	JACK W. BLUMENSTEIN
STREET ADDRESS		3.3 STREET ADDRESS	5201 CONGRESS AVENUE, C-232
CITY-ST-ZIP		3.4 CITY-ST-ZIP	BOCA RATON, FLORIDA 33487
TITLE		4.1 TITLE	DIRECTOR (D)
NAME		4.2 NAME	PAUL SAGAN
STREET ADDRESS		4.3 STREET ADDRESS	5201 CONGRESS AVENUE, C-232
CITY-ST-ZIP		4.4 CITY-ST-ZIP	BOCA RATON, FLORIDA 33487
TITLE		5.1 TITLE	OFFICER (V/T/S)
NAME		5.2 NAME	STEPHEN J. RATTNER
STREET ADDRESS		5.3 STREET ADDRESS	5201 CONGRESS AVENUE, C-232
CITY-ST-ZIP		5.4 CITY-ST-ZIP	BOCA RATON, FLORIDA 33487
TITLE		6.1 TITLE	OFFICER (V)
NAME		6.2 NAME	WILLIAM KELEMAN
STREET ADDRESS		6.3 STREET ADDRESS	5201 CONGRESS AVENUE, C-232
CITY-ST-ZIP		6.4 CITY-ST-ZIP	BOCA RATON, FLORIDA 33487

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, 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.

SIGNATURE: \_\_\_\_\_ DATE: 3/13/98  
521-945-5691

CR2E034 (10/97)