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May 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000019657 (2)

1. Corporation Name

21ST CENTURY TECHNOLOGY INC.

Principal Place of Business
12450 S.W. 104TH TERRACE
MIAMI FL 33186

Mailing Address
12450 S.W. 104TH TERRACE
MIAMI FL 33186-3617

3. Date Incorporated or Qualified
03/10/1995

3a. Date of Last Report
08/07/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 33186

25 U.S.A.

29

30

4. FEI Number
65-0575836

Applied For
☒ Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLOOD, EDWIN
12450 S.W. 104TH TERRACE
MIAMI FL 33186

81 Name EDWIN A. FLOOD

82 Street Address (P.O. Box Number is Not Acceptable)
12450 S.W. 104 TERR.

83

84 City MIAMI FLA

FL

85 Zip Code 33186

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P / CH. 2d.
NAME FLOOD, EDWIN
STREET ADDRESS 12450 SW 104 TERRACE
CITY-ST-ZIP MIAMI FL

1.1 TITLE CHAIRMAN OF THE Bd.
1.2 NAME EDWIN A. FLOOD
1.3 STREET ADDRESS SAME
1.4 CITY-ST-ZIP "

TITLE V
NAME SEGROVE, BEATRICE
STREET ADDRESS 2307 25 AVENUE
CITY-ST-ZIP SAN FRANCISCO CA

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE V
NAME PARDO, THEODORE
STREET ADDRESS 801 S BAYSHORE DRIVE #1855
CITY-ST-ZIP MIAMI FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ST
NAME FLOOD, THERESA
STREET ADDRESS 12450 SW 104 TERRACE
CITY-ST-ZIP MIAMI FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 by me. 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.

SIGNATURE:

Edwin A. Flood

4/21/97 (305) 59591

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone

CR2E034 (9/96)