PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000053797 1. Corporation Name

PHYSICAL SYSTEMS, INC.

Principal	Place	of	Business

4301 32ND STREET WEST

SUITE E-15

BRADENTON FL 34205

Mailing Address

4301 32ND STREET WEST SUITE E-15

BRADENTON FL 34205

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90114 011 ***150.00

no	NOT	TAMPIT	TE INI	THIC	CDA	

3 Date Incorporated or Qualifed

**		••		07/12/1995				
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	App	lied For		
21 509	9-70TH Street	26 509-70 TH	Storet	65-0699250	Not	Applicable		
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	8.75 Ad	· 1		
22		27		5. Certificate of Status Desired	Fee Req	uired		
City & State Zip Country Zip Zip Country Zip Zip Country Zip Country Zip Country Zip Country Zip Zip Country Zip Country Zip Country Zip Country Zip Country Zip Country Zip Zip Country Zip Zip Country Zip Zip Zip Zip Country Zip Zip Zip Zip Zip Zip Zip Zi			the Florid	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country Zip Country			8. This corporation owes the current year Intangit					
24 3 &217-1207 25 USA 29 34217-1207 30 C			USA	Personal Property Tax.		≋ No		
	9. Name and Address of Current			10. Name and Address of New Registered Age	<u>nt</u>			
			81 Name	Rolf Bertram				
	TRAM, ROLF			Address (P.O. Box Number is Not Acceptable)				
	1 32ND STREET WEST		509-70TH Street					
	TE E-15		83			1		
Bra	DENTON FL 34205		84 City	8	5 Zip Co	ode		
			" " Ju	olmes Beach FL	392	17-1207		
l office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was autho	the above-named orized by the corpo	corporation submits this statement for the purpose of char oration's board of directors. I hereby accept the appointme	nging its regi	egistered istered		
l	Im familiar with, and accept the obligate	Bolf Berton		@10199				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	gistered Agent signature re	equired when reinstating) Q / 8/99 DATE	-			
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTOF			
TITLE	DP	☐ DELETE	1.1 TITLE	DP	Change	☐ Addition		
NAME	BERTRAM, ROLF		1.2 NAME	Bertram Rolf Bertram		7		
STREET ADDRESS 4301 32ND STREET WEST, SUITE E-15			Berton Alf Bertram 509-70TH Street					
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-ST-ZIP	Holmes Beach, FL 34217-	<u>/207</u>	·		
TITLE		☐ DELETE	2.1 TITLE		Change	Addition C		
NAME			2.2 NAME			ļ		
STREET ADDRESS			2.3 STREET ADDRESS			ļ		
CITY-ST-ZIP			2.4 CITY-ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE		Change	☐ Addition		
NAME			3.2 NAME					
STREET ADDRESS)		3.3 STREET ADDRESS					
CITY-ST-ZiP			3.4. CITY-ST-ZIP	·				
TITLE		☐ DELETE	4.1 TITLE		Change	☐ Addition		
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS			}		
CITY-ST-ZIP			4.4 CITY-ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition		
NAME	1		5.2 NAME]		
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP	1		5,4 CiTY-ST-ZiP			}		
JIII-31-21	1							

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 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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

☐ DELETE

94-1-778-8381

Change

☐ Addition