

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  
Apr 29, 1999 8:00 am  
Secretary of State

04-29-1999 90263 013 \*\*\*150.00

DOCUMENT # P95000058618

1. Corporation Name  
FLORIDA TRAFFIC WATCH, INC.

Principal Place of Business  
1940 HARRISON STREET  
SUITE 300  
HOLLYWOOD FL 33020  
US

Mailing Address  
1940 HARRISON STREET  
STE 300  
HOLLYWOOD FL 33020  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
07/28/1995

4. FEI Number  
65-0601882

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be  
Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business  
21 3389 SHERIDAN ST.  
Suite, Apt. #, etc.

22 #307

23 HOLLYWOOD, FL  
City & State

24 33021 25 BROWARD  
Zip Country

2a. Mailing Address  
26 3389 SHERIDAN ST.  
Suite, Apt. #, etc.

27 #307

28 HOLLYWOOD, FL  
City & State

29 33021 30 BROWARD  
Zip Country

9. Name and Address of Current Registered Agent

BUTLER, CHRISTINE A ESQ  
5420 OAK CANOPY WAY  
FT LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

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

TITLE D  
NAME DEVANE, RUFUS K  
STREET ADDRESS C/O 1940 HARRISON STREET STE 300  
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE PTD  
NAME BUTLER, JAMES R  
STREET ADDRESS C/O 1940 HARRISON STREET STE 300  
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE D  
NAME DENNIS, CARLOS J.  
STREET ADDRESS C/O 1940 HARRISON STREET, STE 300  
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE D  
NAME NATHANSON, THEODORE  
STREET ADDRESS C/O 1940 HARRISON STREET STE 300  
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE D  
NAME PONDOLFI, ROBERT  
STREET ADDRESS C/O 1940 HARRISON STREET STE 300  
CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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

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

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

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

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)

0141885