

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

FILED
May 12 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000060688 (5)
1. Corporation Name
ETB TECHNOLOGIES, INC.



Principal Place of Business
3 SPEEN ST
SUITE 200
FRAMINGHAM MA 01701
US

Mailing Address
101 SOUTHHALL LANE
SUITE 125
MAITLAND FL 32751

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 8240 NW 52 Terr		08/04/1995	
22 City & State		27 #500		4. FEI Number	
23 Zip		28 Miami, FL		59-3328630	
24 Country		29 33166		Applied For	
25		30 USA		Not Applicable	
5. Certificate of Status Desired				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
<input type="checkbox"/> \$8.75 Additional Fee Required				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
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

B&C CORPORATE SERVICES OF CENTRAL FL, INC.
390 NORTH ORANGE AVENUE
SUITE 1100
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D, VP	1.1 TITLE	D, P
NAME	WHITE, ROBYN A	1.2 NAME	Mitchell, Donna
STREET ADDRESS	% 101 SOUTHHALL LANE, SUITE 125	1.3 STREET ADDRESS	101 Southhall Lane, # 125
CITY-ST-ZIP	MAITLAND FL 32751	1.4 CITY-ST-ZIP	Maitland, FL 32751
TITLE	D, VP	2.1 TITLE	D, VP
NAME	HICKS, KEITH O	2.2 NAME	Garcia, Julia
STREET ADDRESS	% 101 SOUTHHALL LANE, SUITE 125	2.3 STREET ADDRESS	Three Speen Street #200
CITY-ST-ZIP	MAITLAND FL 32751	2.4 CITY-ST-ZIP	Framingham, MA 01701
TITLE	D	3.1 TITLE	
NAME	ALLIGOOD, RANDALL M	3.2 NAME	
STREET ADDRESS	% 101 SOUTHHALL LANE, SUITE 125	3.3 STREET ADDRESS	
CITY-ST-ZIP	MAITLAND FL 32751	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	WHITE, GREGORY G	4.2 NAME	
STREET ADDRESS	% 101 SOUTHHALL LANE, SUITE 125	4.3 STREET ADDRESS	
CITY-ST-ZIP	MAITLAND FL 32751	4.4 CITY-ST-ZIP	
TITLE	D, VP	5.1 TITLE	
NAME	SABACINSKI, DIANA	5.2 NAME	
STREET ADDRESS	% 101 SOUTHHALL LANE, SUITE 125	5.3 STREET ADDRESS	
CITY-ST-ZIP	MAITLAND FL 32751	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	WHITE, BEVERLY	6.2 NAME	
STREET ADDRESS	% 101 SOUTHHALL LANE, SUITE 125	6.3 STREET ADDRESS	
CITY-ST-ZIP	MAITLAND FL 32751	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 registered agent 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 or changed on an attachment with an address.

SIGNATURE _____ Julia Garcia - President 4/20/98 512-899-2121

CR2E034 (10/97)