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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000067878 (5)

POLGER TECHNOLOGIES, CORP.

Principal Place of Business Mailing Address

5840 RED BUG LAKE ROAD #330 5840 RED BUG LAKE RO

FILED Mar 05 1998 8:00am Secretary of State



WINTER SPRINGS FL 32708			WINTER SPRINGS FL 32708		OO MOT WOITE IN TURA	CDACE		
					DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualified			
A Discission Di		2a. Mailing Addres			09/01/1995 4. FEI Number	·····	Applied For	
<del>-</del>	ace of Business	— <u> </u>	8		59-3334772		Not Applicable	
Suite, Apt. #, etc.		26   Suite, Apt. #, e	lc:		_		5 Additional	
22		27	<del>_</del>		5. Certificate of Status Desired Fee Required			
City & State		City & State			6. Election Campaign Financing	\$5.	00 May Be	
23		28			Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cour	try	8. This corporation owes or has paid the current year Intangible			
24	25	29	30		1 block at 1 topony tax but but by			
	9. Name and Address of Cu	irrent Registered Agent			10. Name and Address of New Registered	Agent		
	rget, Susan		1	31 Name				
	7 NORTHERN WAY				82 Street Address (P.O. Box Number is Not Acceptable)			
WIN	ITER SPRINGS FL 32708		1					
				33				
				34 City	FL	85	Zip Code	
11. Pursuant to office or reagent. Lar	o the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the c	,0502 and 607,1508, Florida State of Florida. Such change obligations of, Section 607.05	Statutes, the ab was authorized 05, Florida Statu	ove-named of by the corporates.	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appropriate the purpose of the purpos	f changi xxintmen	ng its registered t as registered	
SIGNATURE .	Signature, typed or printed name of registric	nd agent and title if applicable	(NOTE Registered	Agent signature re	equired when reinstaling) DATE			
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	_		
TITLE	D	☐ DELE	TE 1.1 TIT	.E		☐ Cha	nge LAddition	
NAME	BURGET, SUSAN		1.2 NA	AE .			1;	
STREET ADDRESS	1107 NORTHERN WAY		1.3 STF	EET ADDRESS			Į;	
CITY-ST-ZIP	WINTER SPRINGS FL 327			r-ST-ZIP				
TITLE	\$	☐ DELE	TE 2.1 TIT	.E		Cha	nge 🔲 Addition 📙	
NAME	Kremer, Judith		2.2 NA	AE .				
STREET ADDRESS	1 <del>107 NORTHERN WAY</del>	0 -		EET ADDRESS			l	
CITY-ST-ZIP	WINTER SPRINGS FL 327	108 Crystac Kwer H	2. 4 Cl	Y-ST-ZIP		П.		
TITLE		DELE	TE 3.1 TIT	.E		☐ Cha	nge 🔲 Addition	
NAME			3.2 NAI	AE				
STREET ADDRESS			3.3 STF	EET ADDRESS			İ	
C!TY-ST-ZIP				Y-ST-ZIP				
TITLE		☐ DELE	TE 4.1 TIT	.E		Cha	nge 🔲 Addition	
NAME			4. 2 NA	ME			i	
STREET ADDRESS			4.3 STF	EET ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP		F-1 2.7		
TITLE		☐ DELE	TE 5.1 TIT	E		☐ Cha	nge 🔲 Addition	
NAME			5.2 NAI	NE				
STREET ADDRESS			5.3 STF	EET ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP		<del></del>		
TITLE		☐ DELE	ETE 6.1 TIT	.E		☐ Cha	nge 🔲 Addition	
NAME			6.2 NA	AE			İ	
STREET ADDRESS	•		6.3 STF	EET ADDRESS			ł	
CITY-ST-ZIP			6.4 C(T	Y-ST-ZIP				

14. I hereby certify that the information supplied with this filling 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 attachmen with an address.