FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # P95000076876 (8)

COVE TECHNOLOGY GROUP INC.						
Principal Place of Business Mailing Address						
2406 STONEHAVEN COURT 2406 STONEHAVEN ORANGE PARK FL 32065-2 ORANGE PARK FL						
				3. Date Incorporated or Qualified 10/06/1995	3a. Date of Last F	Report
_2. Principal Plan 21	ne of Business	2a. Mailing Address 26		4. FEI Number 59-33373	68	Applied For Not Applicable
	Suite, Apt. #, etc. Suite, Apt.			5. Certificate of Status Desired	\$8.7	5 Additional Required
City & State		City & State		6. Election Campaign Financing	\$5.C	00 May Be
23	Country	28 Zip	Country	Trust Fund Contribution 8. This corporation has liability for i	ntangible tax under s	ed to Fees s 199.032,
24	9 Name and Address of Curr	29	30	Florida Statutes Yes		
	9. Name and Address of Curr	ent Hegistered Agent	81 Name 🔥	10. Name and Address of New R	agistered Agent	
00000	NATE ORESTIANA ENTEANA	1050 1110	OT IVAILE	Marilun Hollan		
	PRATE CREATIONS ENTERPR	ISES, INC.	82 Street Add	ress (P.O. Box Number is Not Acceptab		
SUITE 2	GA BLVD,		83	105 Stonehave	1 LI-	
	BEACH GARDENS FL 33418					
PALM	DEAUTI GARDENS FL 33418		84 City (()	con a Dania	FL 85 2	p Code
11. Pursuant to	the provisions of Sections 607 05	02 and 607 1508. Florida Stati.	ites, the above-named corno	ration submits this statement for the pur	page of changing its	12065
or registere:	a agent, or both, in the State of No	xida. Such change was authori	ized by the corporation's boa	ard of directors. I hereby accept the appoint	intment as registere	d agent. I am
	i, and accept the obligations of, Se	ction 1907.0505, Florida Statute	0\$.		iliala.	
SIGNATURE	ld safere. Typed organized non-e-of-pointered au	ont and title it application (f)	IOTE Registered Agent signature requin	ad whose regetalized	1117179	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT	ORS IN 12
Inf.,E	D	DELETE	1 1 TITLE		Change	Addition
NAME	HOLLAN, DAVID		1.2 NAME			_
SPEEL LADORESS			1.3 STREET ADORESS			
CITY ST-ZIP	ORANGE PARK FL 32065		1.4 CHY+ST-ZIP			
TH.F		DELETE	2 1 THILE		Change	Addition
NAME			2 2 NAME			_
STREET ADDRESS			2 3 STREET ADDRESS			
CHY ST ZIP			24 CITY - ST - ZIP			
THRE		☐ DELETE	3 1 TITLE		Change	Addition
NAME			3 2 NAME			
STREET ADDRESS			33 STREET ADDRESS			
CITY - \$1 - 712			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		ETI DELETE	4.4 CHTY-ST-ZIP		F1 A.	
11°LE		[] DELETE	. 5 1 TITLE		☐ Change	☐ Addition
NAME STUDIE ADDOCADO			5 2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CICY ST-ZIP		DELETE	5.4 CHTY-ST-ZIP		☐ Change	□ Addition
NAME			6 1 TITLE		Unange	Addition
STREET ADDRESS			6.2 NAME			
			6.3 STREET ADDRESS			
14. I do horeby	certify that the information supplies	d with this filing is voluntarily fur	64 CITY-\$1-ZIP	for the exemption stated in Section 119.	07/3)/k) Florida Stati	ttes I further
certify that t oath; that I : appears in I	the information indicated on this an am an officer or director of the con Block 12 or Block 13 if changed, b	riual report or supplemental an poration on the receiver or trust cog an attach nent viitu an add	nual report is true and accura ee empowered to execute th dress.	ate and that my signature shall have the is report as required by Chapter 607, Fk	same legal effect as orida Statutes; and th	if made under nat my name