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May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000094748 (7)

1. Corporation Name
TECHNOLOGY PLACE, INC.



Principal Place of Business
2499 W GLADES ROAD
SUITE 209
BOCA RATON FL 33431

Mailing Address
2499 W GLADES ROAD
SUITE 209
BOCA RATON FL 33431-7201

3. Date Incorporated or Qualified 12/13/1995
3a. Date of Last Report 04/30/1996

2. Principal Place of Business
21 7031 N.W. Turtle Walk
Suite, Apt. #, etc.

2a. Mailing Address
26 P.O. Box 811135
Suite, Apt. #, etc.

4. FEI Number 65-0634769
Applied For Not Applicable

22 City & State BOCA RATON, FL.

27 City & State BOCA RATON, FL

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

23 Zip 33487 Country U.S.A.

28 Zip 33481-1135 Country U.S.A.

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

24 33487 25 U.S.A.

29 33481-1135 30 U.S.A.

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAVID A. RUSTINE
2499 W. GLADES ROAD
SUITE 209
BOCA RATON FL 33431

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 7031 N.W. Turtle Walk
83
84 City Boca Raton FL 85 Zip Code 33487

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 PSTD
NAME RUSTINE, DAVID A
STREET ADDRESS 2499 W GLADES ROAD, SUITE 209
CITY-ST-ZIP BOCA RATON FL 33431

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 7031 N.W. Turtle Walk
1.4 CITY-ST-ZIP Boca Raton, FL 33487

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE: [Signature] 4/8/97 (561) 997-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)