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

DOCUMENT # 1. Corporation Name

P95000097828 (4)

CYBER-TECHNIQUES INTERNATIONAL, INC.						
Principal Place	of Business	Mailing Address		i (62)(62) již (5)6) živi Bolil Bolil Atvi Bolil Atvi Adalı 1610 1619 1619	1 1001	
140 NW 217TH TERRACE PEMBROKE PINES FL 33029		140 NW 217TH TERRACE PEMBROKE PINES FL 33029				
				3. Date Incorporated or Qualified 3a. Date of Last Report 12/28/1995		
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number Applied		
21		26		47-0470-1	plicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired See Require		
22		27				
City & State		City & State		6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fe		
23	Country	28 Zip	Country	This corporation has liability for intengible tax under s 199.0:		
Zip 24	25	29	30	Florida Statutes Yes You	1	
24	9. Name and Address of Curren		1001	10. Name and Address of New Registered Agent		
-			81 Name	11 +1 6- tox		
FILINGS,	INC.		B2 Street A	object d. GenTax odress (P.O. Box Number is Not Acceptable)		
3732 NW 16TH ST			140	N.W. 217 Terrace		
	ERDALE FL 33311		83			
1, 2,00			84 010	85 Zip Code		
			1 1 2 4	whenke times FL 33099	-1013	
11. Pursuant t	o the provisions of Sections 607.0502	2 and 607.1508, Florida Statut	es, the above-named cor	poration submits this statement for the purpose of changing its register	ed office	
or registere familiar wit	ed agent, or both, in the State of Flori h, and accept the obligations of Sect	da. Such change was aurionz hon <u>607,0</u> 505, Florida Statutes	ed by the corporations t	poration submits this statement for the purpose of changing its register located of directors. I hereby accept the appointment as registered agent		
SIGNATURE	Robert L. H.	h Presid	ral Kobe	-t d. Genlay 7-16.76		
	Signature, typed or printed name of registered agent		TE: Registered Agent signature rec 13.	urad when renstating) PATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12	
12.	OFFIGERS AN	ID DÎHECTORS			Addition	
TITLE	GENLRY, ROBERT L		1.2 NAME	Robert d. GenTRY		
NAME STREET ADDRESS	140 NW 217TH TERRACE		1.3 STREET ADDRESS	140 N.W. 217th Terhace		
	PEMBROKE PINES FL 33311		1.4 CITY - ST - ZIP	Robert d. GrenTRY 140 N.W. 217th Ferbace Pembroke Pines Fl 33029-1013		
CITY-SI-ZIP	TEMPROTE TRIESTE SOUTH	☐ DELETE	2 1 TITLE	☐ Change ☐ a	Addition	
NAME		_	2 2 NAME		İ	
STREET ADDRESS			2 3 STREET ADDRESS			
CITY-ST-ZIP			24 CITY-ST-ZIP			
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STREET ADDRESS			3 3. STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY - ST - ZIP			
TITLE		DELETE	4. 1 TITLE	☐ Change ☐	Addition	
KAME			4.2 NAME	•	}	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Channa -	Addition	
TITLE		☐ DELETE	5 1 TITLE	Change []	Addition:	
NAME			52 NAME		ļ	
STHEFT ADDRESS			5 3 STREET ADDRESS			
CITY-SY-ZIP		FT DELETE	5.4 CITY-ST-ZIP	☐ Change ☐	Addition	
TITLE		DELETE	6.1 TITLE	- Strange -		
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
City St. 7iP			6 4 City - St - ZIP		,	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)/k), 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:

SIGNING OF ICER OF DIRECTOR

4-16-96 Date

954-435-8797