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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000013075

1. Corporation Name P.T.I. INSTRUMENTS CORP.

Principal Place of Business 700 RIDGEWOOD ROAD KEY BISCAYNE FL 33149

Mailing Address 700 RIDGEWOOD ROAD KEY BISCAYNE FL 33149



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 295 HARBOR DRIVE Suite, Apt. #, etc. 22

2a. Mailing Address 26 295 HARBOR DRIVE Suite, Apt. #, etc. 27

23 City & State KEY BISCAYNE FL

28 City & State KEY BISCAYNE FL

24 Zip 33149 Country 25 USA

29 Zip 33149 Country 30 USA

3. Date Incorporated or Qualified 02/12/1996

4. FEI Number 65-0640061 Applied For Not Applicable

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

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

8. This corporation owes the current year intangible Personal Property Tax. [X] Yes [] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SIMOES, RICARDO T 700 RIDGEWOOD ROAD KEY BISCAYNE FL 33149

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 295 HARBOR DRIVE
83
84 City KEY BISCAYNE FL 85 Zip Code 33149

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] (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSD NAME SIMOES, RICARDO T STREET ADDRESS 700 RIDGEWOOD ROAD CITY-ST-ZIP KEY BISCAYNE FL 33149 [] DELETE

1.1 TITLE [] Change [] Addition 1.2 NAME 1.3 STREET ADDRESS 295 HARBOR DRIVE 1.4 CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE [] DELETE

2.1 TITLE [] Change [] Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

TITLE [] DELETE

3.1 TITLE [] Change [] Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

TITLE [] DELETE

4.1 TITLE [] Change [] Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

TITLE [] DELETE

5.1 TITLE [] Change [] Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

TITLE [] DELETE

6.1 TITLE [] Change [] Addition 6.2 NAME 6.3 STREET ADDRESS 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 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, with all other like empowered.

SIGNATURE: [Signature] Ricardo T. Simoes 2/24/99. Date Daytime Phone #

CR2E034 (4-11-98)