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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

1. Corporation Name

P96000015457 (0)

VERTICAL TECH, INCORPORATED

Principal Place of Business	Mailing Address
7328 NW 21 ST	7328 NW 21 ST
MARGATE FL 33063	MARGATE FL 33083

FILED Mar 19 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1 10011001 111 10110 01111 00111 00111 00111 10111 11111 111111	JI UUHAH UHUUL U			
7328 NW 21 ST 7328 NW 21 ST MARGATE FL 33083			DO NOT WRITE IN THIS SPACE						
						3. Date Incorporated or Qualified			
6 Principal C	Place of Business	B. Mailing Address				02/16/1996			
_	Tace of business	2a. Mailing Address				4. FEI Number		plied For	
Suite, Apt.	#. elc.	Suite, Apt. #, etc.				65:0660455	\$8.75 A	t Applicable	
22						5. Certificate of Status Desired	Fee Re		
	City & State City & State					6. Election Campaign Financing	\$5.00	May Be	
23						Trust Fund Contribution	Added to	o Fees	
Zip ├──┐	Country	Zip	Cour			8. This corporation owes or has paid the current year Intangible			
24	25 29 30 30 9. Name and Address of Current Registered Agent					Personal Property Tax due June 30. Yes No			
		nt riegistered Agent		B1	Name	10. Name and Address of New Registered Ag	jent		
LEWIS, ALVIN SR							_		
	328 NW 21 ST MARGATE FL 33063			82	Street Addres	ddress (P.O. Box Number is Not Acceptable)			
. 10	MANGATE PE 33003		ŀ	83					
•			ŀ	84	City		85 Zip C	oda	
						FL			
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						when reinstaling) DATE			
12,	Signature typud or printed name of registered ag	ID DIRECTORS	13.	Ageni	signature required	ADDITIONS/CHANGES TO OFFICERS AND D	IDECTOR	2 INI 13	
TITLE	P	DELETE	1.1 707	L£			Change	Addition	
NAME	LEWIS, SR ALVIO		1.2 NA			·	- •	_	
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NAME			2.2 NA	ME				1	
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NAME			5.2 NA		000000		W >	112	
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NAME STREET ADDRESS			6.2 NA		DDDENO	30000246217 -03/19/9801062017	-	1	
STREET ADDRESS					DDRESS	***150.00			
CITY-ST-ZIP	atility that the information a maked w	with this filing does not qualify for		Y-\$1-		ection 119 07(3)(i) Florida Statutas I further certi	t that the i	nformation	

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 appallachment with an address.