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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P960000
1. Corporation Name
OCEAN DRIVE TECHNOLOGIES, INC. P96000041427 (1)

FILED Apr 28 1998 8:00am Secretary of State



22/98

Principal Place	or Business	Mailing Address						
101 N OCEAN OR SUITE 206 101 N OCEAN HOLLYWOOD FL 33019 HOLLYWOOD								
HOLLIWOOD	FL 33019	HOLLYWOOD FL 33019			DO NOT WRITE IN T	HIS SPACE		
					3. Date Incorporated or Qualified	113 OF ACL		
		•			05/09/1996			
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applie	ed For	
26					65-0677072		pplicable	
Sulte, Apt. #, etc. Suite, Apt. #, et						\$8.75 Add		
22 SUITE 207 27		27 SVITE 20"	SVITE 207		5. Certificate of Status Desired	Fee Requi		
City & State		City & State			6. Election Campaign Financing	\$5.00 Ma	ıv Be	
23		28			Trust Fund Contribution	Added to F		
Zip	Country	Zip	Country		8. This corporation owes or has paid the	current year Intang	jible	
24	25 29 30 9. Name and Address of Current Registered Agent			Personal Property Tax due June 30. Yes X No				
	_ <u></u>	nt Registered Agent		NAT ALL ST	10. Name and Address of New Registe	red Agent		
	ODALL, BRENDA		'	31 Name				
101 N OCEAN DR SUITE 206				32 Street	Address (P.O. Box Number is Not Acceptable)			
HO	LLYWOOD FL 33019		ļ.	<u></u>				
			[1	33				
			ļ.	34 City		85 Zip Cod	je	
						FL 83 240 COO		
11. Pursuant to office or re	o the provisions of Sections 607.050 coistered agent, or both, in the State	02 and 607,1508, Florida S tatut e of Florida, Such change was	tes, the abo authorized	ove-named by the cor	d corporation submits this statement for the purpor poration's board of directors. I hereby accept the	se of changing its re appointment as req	∌gistered iistered	
agent. I an	familiar with, and accept the oblig	jations of Section 607.0505, Fi	orida Statu	tes.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SIGNATURE _								
	Ilgnature, typed or printed name of registered ag			Agent signature	e required when reinstating) ADDITIONS/CHANGES TO OFFICERS		NI 10	
TITLE	OFFICERS AND DIRECTORS DELETE		13.	<u> </u>	ADDITIONS/CHANGES TO OFFICERS		Addition	
	GOODALL, BRENDA	OLLEIL	1.2 NAN			Criange	_ Magnani	
NAME	101 N OCEAN DR SUITE 20	R	I					
STREET ADDRESS	HOLLYWOOD FL 33019			EET ADDRESS				
CITY-ST-ZIP TITLE	P	DELETE	2.1 TITL	r-ST-ZIP		Change	Addition	
NAME	GREER, MICHAEL	La beene	2.2 NAM			Onlings		
STREET ADDRESS	351 VIRGINIA ST		•	eet address				
	HOLLYWOOD FL 33019		1					
CITY-ST-ZIP TITLE		DELETE	2. 4 UII 3.1 TITL	Y-ST-ZIP		Change	Addition	
NAME	GOODALL, RICHARD	La beccu	3 2 NAN			C Change C		
STREET ADDRESS	7940 CASTLE PINES AVE			eet address	•			
CITY-ST-ZIP	LAS VEGAS NV 89113			Y-ST-ZIP				
TITLE		☐ DELETE	4.1 TITL			Change	Addition	
NAME	CHRISTO, GEORGE		4.2 NA					
STREET ADDRESS	178 ROSEMONT DR			EET ADDRESS				
CITY-ST-ZIP	NORTH ANDOUER MA 0184	5		- ST - ZIP	NORTH ANDOVER MA 01845	,		
TITLE		DELETE	5.1 TITL		1000111 1/1000 0010		Addition	
NAME			5.2 NAN	_				
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP				- ST- ZIP				
TITLE		☐ DELETE	6 1 7 ITL			Change	Addition	
NAME			6.2 NAM	iE				
STREET ADDRESS				EET ADDRESS	1			
CITY-ST-ZIP				-ST-ZIP				
14. I hereby ce	ertify that the information supplied v	vith this filing does not qualify f	or the exer	nption state	ed in Section 119.07(3)(i), Florida Statutes. I furthe	er certify that the info	ormation	
officer or d	irector of the corporation or the rec	eiver or trustee empowered to			gnature shall have the same legal effect as if mad s required by Chapter 607, Florida Statutes; and t			
Block 12 or	r Block 13 if chariged or on an atta	chrnent with an address		-,	,,,,	,		