

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

FILED
Mar 20 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 # P96000055701 (2)

1. Corporation Name

MICROCEPTION, INC.

Principal Place of Business

3800 GALT OCEAN DRIVE #801
FORT LAUDERDALE FL 33301

Mailing Address

3800 GALT OCEAN DRIVE #801
FORT LAUDERDALE FL 33308-7847

3. Date Incorporated or Qualified
07/01/1996

3a. Date of Last Report
N/A

4. FEI Number
65-0684655

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 3800 GALT OCEAN DRIVE
Suite, Apt. #, etc.

22 SUITE 801
City & State

23 FORT LAUDERDALE FL
Zip

24 33301 Country

2a. Mailing Address

26 3800 GALT OCEAN DRIVE
Suite, Apt. #, etc.

27 SUITE 801
City & State

28 FORT LAUDERDALE
Zip

29 33301 Country

9. Name and Address of Current Registered Agent

BERKOVSKY, DAVID
3800 GALT OCEAN DRIVE #701
FORT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name BERKOVSKY, DAVID
82 Street Address (P.O. Box Number is Not Acceptable)
3800 GALT OCEAN DRIVE, SUITE 801
83
84 City FORT LAUDERDALE FL 85 Zip Code 33301

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's signature required when resigning)

3/15/97
DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	BERKOVSKY, DAVID	3800 GALT OCEAN DRIVE #701	FORT LAUDERDALE FL 33301	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 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 or changed on an attachment with an address.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/97
Date

Daytime Phone: #

0263269

CR2E034 (9/96)