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· PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## FILED Feb 09, 1999 8:00 am Secretary of State 02-09-1999 90021 040 \*\*\*150.00

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DOCU 1. Corporation	IMENT # P9600	00057020	)					
LIFTRO	NICS, INC.							
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1				1				
Principal Plac	ce of Business	Mailing Addre	ss					
2353 BRENGLI		7625 HIGH ME			,	•		•
ORLANDO FL	32808	ORLANDO FL	52822			O NOT WRITE IN THIS	SPACE	
					3. Date incorporated	or Qualifed	· · · · · · · · · · · · · · · · · · ·	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				•	07/02/1996	•	,	
2. Principal f	Place of Business	2a. Mailing Ad	dress	!	4. FEI Number	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		pplied For
21	. # -4-	26 Suite, Apt.	# 040	1	59-3386810	*		ot Applicable
Suite Apt	i. #, etc.	27 Suite, Apt.	#, <del>0</del> 16.		5. Certifcate of Statu	ıs Desired 🔲 .		Additional equired
in City & Sta	ate	City & Sta	te		6. Election Campaig	n Financing		May Be
23	•	28		:	Trust Fund Contri	n Financing bution		to Fees
ri Zip	Country	Zip		ountry		wes the current year In		_
24 . i	25	29	30	1	Personal Property		☐ Yes -	□No
11/4-3	9. Name and Address of Cur	rrent Registered Agen	<u>.                                    </u>	81 Name	10. Name and Addre	ess of New Registered	Agent	
WIL WIL	LIAMS, DONALD L				•	<u> </u>		
7625 HIGH MEADOW CIR.			82 Street Address (P.Q. Box Number is Not Acceptable)					
ORI	LANDO FL 32822			83		7 3 3 7		
				94 60			leeli zav	0-4-2
	·			84 City		FL	85 Zip (	Code
11. Pursuani	t to the provisions of Sections 607.0 registered agent, or both, in the Sta	0502 and 607 1508, Flo	orida Statutes, the	above-named co	rporation submits this state	ment for the purpose of	changing its	registered
the office of								vaietored I
office or agent. I a	am familiar with, and accept the obl	ate of Flonda. Such chi ligations of, Section 60	ange was authorize 7.0505, Florida Sta	ed by the corpora stutes.	tion's board of directors.	nereby accept the appo	ntment as re	egistered
office or agent. I	am familiar with, and accept the obl	ligations of, Section 60	7.0505, Florida Sta	atutes.			ntment as re	egistered
agent. I a	am familiar with, and accept the oblined in the state of	ligations of, Section 60 agent and title if applicable.	7.0505, Florida Sta	atutes.	ired when reinstating)	DATE	• :	·
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il hereby certify that the information su judicated on this annual report or sup officer or director of the corporation of Block 12 or Block 13 if changed, or or lied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information in the properties of the same and accurate and that my signature shall have the same legal effect as if made under oath; that I am an a preceiver or trystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in other like empowered.