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 # P96000057264 (9)

NEXT DIMENSION TECHNOLOGY, INC.

FILED May 04 1998 8:00am Secretary of State



					<u> </u>
Principal Place	e of Business	Mailing Address			BASIN INDIA LIAIR BIIII BASI IRDI
325 CYPRESS DRIVE 125 CORTES AVENUE TEQUESTA FL 33469 ROYAL PALM BEACH FL		. 33411	DO NOT WRITE IN THI	C CDACE	
1				3, Date Incorporated or Qualified	3 3FAOL
				07/05/1996	
2. Principal P	lace of Business,	2a. Mailing Address		4, FEI Number	Applied For
20 362	Cypress Drive	26		65-0682977	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
27			5. Continuate of Status Besired	Fee Required	
City & State	9	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιp	Country	Zip	Country	8. This corporation owes or has paid the o	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
9, Name and Address of Current Registered Agent 10, Name and Address of New NAME MANCY 81 Name					d Agent
DIMAS, NANCY [81]					
125 CORTES AVENUE			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
ROYAL PALM BEACH FL 33411-1301			63		
}			63		
į į			84 City		85 Zip Code
FL Burguage to the provisions of Sections 607 0509 and 607 1509. Florida Statutos the above passed correction submits this statement for the purpose of changing its project and					
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, typed or printed name of registered ag	nnt and lifle if applicable (NO)	E Registered Agent signature regul	red when reinstating) DATE	
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	SLAIGHT, PAUL		1.2 NAME		
STREET ADDRESS	125 CORTES AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	ROYAL PALM BEACH FL 334		1.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	2.1 HTLE		Change Addition
NAME	DIMAS, NANCY		2.2 NAME		
STREET ADDRESS	125 CORTES AVENUE	144 4904	2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	ROYAL PALM BEACH FL 334	T DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		בן אנננונ	32 NAME		C) Origings C) Addition
STREET ADDRESS			3.3 STREET ADDRESS		j
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		į
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		,
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 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 of Changed, or on an attachment with an address.

4-24-98

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