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

Mailing Address

4700 SW 51

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000058001

Corporation Name

PULSE TRAX, INC.

Principal Place of Business

4700 SW 51

FILED Feb 03, 1999 8:00am Secretary of State

02-03-1999 90002 001 ***150.00



ft. Lauderdali		FT LAUDERDALE FL 33314				
US		US		3. Date Incorporated or Qualifed		
us	•			07/10/1996	·.	
		2a. Mailing Address		4. FEI Number	Applied For	
2. Principal Pla	ace of Business	F		65-0691587	Not Applicable	
:i	· · · · · · · · · · · · · · · · · · ·	26 .			\$8.75 Additional	
Suite, Apt. 1	¥, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required	
22		27				
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
	,	28		Trust Fund Contribution	Added to Fees	
23	Contact	Zip	Country	8. This corporation owes the current year	Intangible	
Zip	Country	<u>├</u> ¬. ` □	-	Personal Property Tax.	X Yes □No	
24	25		<u>, i</u>	10. Name and Address of New Registere	ed Agent	
	9. Name and Address of Current	Registered Agent	Q4 Nama	to. Isotho dies		
	多数数数线线线	at with the	81 Name			
GOKALP, TANER		82 Street Addi	ress (P.O. Box Number is Not Acceptable)			
3000 E. SURNISE BLVD.			OI Succertad	82 Street Address (F.O. Dox Harmost to Not Account to the Francisco Street Stre		
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	•			_	<u>'L </u>	
A 14 CA 14 C	# Castions 607 0503	and 607 1508 Florida Statutes	the above-named corp	poration submits this statement for the purpose	of changing its registered	
11. Pursuant	to the provisions of Sections 607.0002	f Florida. Such change was auti	horized by the corporati	ion's board of directors. I hereby accept the ap	pointment as registered	
agent La	m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	la Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the ap		
1177	The state of the s			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: R	egistered Agent signature require	ed when reinstating) , DATE	AND DIDECTORS IN 42	
12.	. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS		
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