SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCUMENT Corporation Name	#	P96000058072

CODE TECHNOLOGY, INC.

Principal Place of Business	Mailing Address	
4600 HUNTLEY LANE SARASOTA FL 34232	4600 HUNTLEY LANE SARASOTA FL 34232	

FILED Aug 11, 1999 8:00 am Secretary of State

08-11-1999 90019 027 ***550.00



Principal Place	e of Business	Mailing Address]			
4600 HUNTLEY		4600 HUNTLEY LANE						
SARASOTA FL	34232	SARASOTA FL 34232			DO NOT WRIT	E IN THIS SE	PACE	
					3. Date Incorporated or Qualified	L 114 11110 01	7.02	
					07/10/1996			
2 Principal Pl	ace of Business	2a. Mailing Address		. 	4. FEI Number		TA:	oplied For
2. Principal Fit	ace of business	26			65-0694349			ot Applicable
Suite, Apt. 7	# etc	Suite, Apt. #, etc.				\neg		Additional
22	<i>n</i> , 000.	27	-		5. Certificate of Status Desired			equired
City & State	e	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution			to Fees
Zip	Country	Zip	Counti	<u> </u>	8. This corporation owes the curre	ent year		
24	25	29	30		Intangible Personal Property.	-	Yes 2	∑ No
	9. Name and Address of Curr				10. Name and Address of New R	egistered Ag	gent	
-			8	1 Name				
	RLY, CHARLES			2 Ctroot Add	iress (P.O. Box Number is Not Accepta	hle\		
	O HUNTLEY LANE	•	8	Z Street Add	iress (F.O. Box Number is Not Accepta	DIG)		
SAR	Pasota FL 34232		8	3	# 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		_	
							1T_ ;	
			8	4 City		FL	85 Zip	Code
dd Duranast	to the provining of postions 607.00		tes the above	e-named corn	oration submits this statement for the pu	rpose of char	naina its re	egistered
11. Pursuant	registered agent, or both, in the Sta	ate of Florida. Such change was	authorized b	by the corporat	tion's board of directors. I hereby accep	t the appointr	ment as re	egistered
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oπice or r agent. I a	am familiar with, and accept the ob	ligations of, section 607.0505, F	lorida Statute	es.				
agent. l a	am familiar with, and accept the ob	ligations of, section 607.0505, F	londa Statute	es. 	united when reinstation)	DATE		
agent. l a	am familiar with, and accept the obling signature, typed or printed name of registered a	igations of, section 607.0505, F	IONIDA Statute	es. 	quired when reinstating)	DATE	DIRECTO	ORS IN 12
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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 if changed, or on an attachment with an address.

SIGNATURE: _