FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE

FILED Apr 21 1998 8:00am

	NUAL REPORT		Sandra B.				- 1 12			
, ",	1998		Secretary DIVISION OF CO			Secre		etary of State		
	UMENT # Technologie	s, Inc	N0000	6714	7					
Principal Place of Business 8721 Cazuput Core FY Myers, FL 33919 Game						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
2. Principa	l Place of Business	2a. Mailir	ng Address			4. FEI Number		A	pplied For	1
21		26				65-06839	<u>7/</u>		ot Applicable]
22 Suite. A	pt. # , el c.	27 Suite	. Apl. #. etc.			5. Certificate of Status De	sired 🔲	•	Additional lequired	
City & S	tate		State			6. Election Campaign Fin.			May Be	1
Zip	Couri	28 Iry Zip		Country		Trust Fund Contribution			to Fees	1
24	25	29	3	Oldmiry		This corporation owes Personal Property Tax of			itangible DNo	
		ess of Current Registered				10. Name and Address of				1
Am	y Sue Ro	achmon			Hm	(P.O. Box Number is Not /		٤		
				83 City_	T+ N	1ye-5	F	85 Zip	Code G	-
11. Pursua office o agent.	nt to the provisions of Sec ir registered agent, or bot I am familiar with, and ac	ctions 607 0502 and 607 150 h, in the State of Florida, Suc cept the obligations of, Secti	8, Florida Statules, hichange was aut on 607.0505, Florid	the above-named horized by the corp da Statutes.	corpora	libn submits this statement	for the ournose	of changing i	ts registered registered	
SIGNATURI		ocol registered agent and official applica		legistered Agent signature			4//2/	48		
12.		DELICERS AND DIRECTORS		13.	e regir led w	ADDITIONS/CHANGES	O OFFICERS AN	ND DIRECTOR	RS IN 12	 6
TITLE	Tres, -	P. / .	DELETE	11 THLE	Pre			Change	☐ Addition	(10/97
NAME	Amy Sue	Kainmen		12 NAME	HMY	I sue Rachmi	Core			
STREET ADDRES	S			1.3 STREET ADDRESS	EL	myes. FX	779,9			CR2E034
TITLE			DELETE.	1.4 CITY+ST-ZIP 2.1 TITLE	' '	Triger, FF	>> ///	☐ Change	Addition	끊
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CITY-ST-ZIP				2 4 CITY - ST - ZIP						
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CITY-ST-ZIP	_			5.4 CITY-ST-ZIP				K] h		
TITLE			DELF1E	6.1 TITLE		20000			Addition	
NAME				6.2 NAME		-04/21/98	01065	-034		
STREET ADDRESS	5			63 STREET ADDRESS		***150.00				
CITY-ST-ZIP	<u> </u>			64 CHY ST-ZIP						

14. Thereby certify that the information supplied with this filting 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 suppliemental 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 trusted 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:

SIGNATU