

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 06, 1999 8:00 am  
Secretary of State

03-06-1999 90004 027 \*\*\*150.00

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1. Corporation Name

MICROTECHNIX INTERNATIONAL, INC.

Principal Place of Business

1175 N COURTENAY PKWY STE 5B  
MERRITT ISLAND FL 32953

Mailing Address

1175 N COURTENAY PKWY STE 5B  
SUITE 4B  
MERRITT ISLAND FL 32953  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/13/1996

4. FEI Number

59-3402621

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TAYLOR, CHARLES W  
1175 N COURTENAY PKWY STE 5B  
MERRITT ISLAND FL 32953

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME TAYLOR, JAMES M  
STREET ADDRESS 2565 RAIN TREE LAKE CIRCLE  
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE D ☐ DELETE  
NAME DAVIS, ROBERT E  
STREET ADDRESS 1687 S GORDON STREET  
CITY-ST-ZIP ATLANTA GA 30310

TITLE D ☒ DELETE  
NAME TAYLOR, PATRICIA M  
STREET ADDRESS 2562 RAIN TREE LAKE CIRCLE  
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE D ☐ DELETE  
NAME TAYLOR, CHARLES W  
STREET ADDRESS 445 POI COURT  
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition  
1.2 NAME D Clarke, Thomas S.  
1.3 STREET ADDRESS 3879 Northlake Creek Dr.  
1.4 CITY-ST-ZIP Tucker, GA 30084

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles W. Taylor, Charles W. Taylor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Business Manager

JAN 29, 1997

Date

Daytime Phone #

707 453-6897

CR2E034 (11/98)