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

PROFIT CORPORATION ANNUAL REPORT 1997

CLEARWATER FL 34621



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

CLEARWATER FL 34621-2825

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000090696 (1)

## FUTURE FIRST TECHNOLOGIES, INC.

Principal Place of Business Mailing Address
2962 MEADOW HILL DRIVE 2962 MEADOW HILL DRIVE

FILED
May 23 1997 8:00am
Secretary of State

	ILLA FEIL		

				Date Incorporated or Qualified     11/05/1996	3a. Date of Last Report			
	Place of Business	2a. Mailing Address		4. FEI Number	Applied			
21			922.	59-3417534	Not App	plicable		
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition			
City & Stat	te	City & State  28 CLEARWATER		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Added to Fee			
Zip ≥4	Country 25	Zip 33758 3	Country  USA	This corporation has liability for Florida Statutes	intangible tax under s. 199.  Yes X No	.032,		
	g. Name and Address of Curr	ent Registered Agent		10. Name and Address of New R	egistered Agent			
PBC	OVENZANO, DENNIS		81 Name					
	2 MEADOW HILL DRIVE							
	ARWATER FL 34621		82 Street A	82 Street Address (P.O. Box Number is Not Acceptable)  83				
OLE	AMINIEM I C 04021		83					
			84 City		85 Zip Code	9		
				orporation submits this statement for the	<u> </u>			
office or r agent. I a SIGNATURE				oration's board of directors. I hereby acce		stered		
	Signature, typed or printed name of registered a		Registered Agent signature re		DATE			
12.		ND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFI		12 Addition		
TITLE	0	L. DELETE		P	□ Change ⊅	Papaillo		
NAME	PROVENZANO, DENNIS		1.2 NAME					
STREET ADORESS	2962 MEADOW HILL DRIVE		1.3 STREET ADDRESS					
C(1y - S1 - ZIP	CLEARWATER FL 34821		1.4 CITY - ST - ZIP					
TITLE		☐ DELETE	2.1 TITLE		Change [	Addition		
NAME	ļ		2.2 NAME					
STREET ADDRESS			2.3 STREET ADDRESS	43	e etc.			
CITY - ST - ZIP			2. 4 CITY - ST - ZIP					
THLE		☐ DELETÉ	3.1 TITLE		☐ Change ☐	Addition		
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY - S1 - ZIP			3.4. CITY - ST-ZIP					
THREE		☐ DELETE	4.1 TITLE		Change	Additio		
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					
STREET ADDRESS			5.3 STREET ADDRESS					
CHY-ST-ZIP			5.4 CITY-ST-ZIP					
TOLE		DELETE	6.1 TITLE		Change	Additio		
	1		6.2 NAME		The Assertation The	, . 100100		
NAME CORREST LIBRORISE								
STREET ADDRESS			6.3 STREET ADDRESS					
CITY, CL. 78P			RACITY_ST_2IP					

14. I do 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 officeed, or on an attachment with an address.

SIGNATURE

NTURE AND YPSO IN PRINTED NAME OF SIGNING OFFICER OF DIRE

PROVENZAND

4/21/47 BIS-544-6050 x226+

Daytima Phone #