

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 01, 1999 8:00 am
Secretary of State

03-01-1999 90250 045 ***150.00

DOCUMENT # P96000104413

1. Corporation Name

COMBINED TECHNOLOGIES INTERNATIONAL CORPORATION



Principal Place of Business

683 SEAPINE CIRCLE
PENSACOLA FL 32506

Mailing Address

683 SEAPINE CIRCLE
PENSACOLA FL 32506

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/01/1997

4. FEI Number

59-3416241

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐

Yes ☒ No

2. Principal Place of Business

21 3601 Pebble Lane

2a. Mailing Address

26 P.O. Box 202

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 MILTON, FL

City & State

28 MILTON, FL

Zip

24 32583

Country

25 USA

Zip

29 32572-0202

Country

30 USA

9. Name and Address of Current Registered Agent

BEASLEY, MICHAEL W
683 SEAPINE CIRCLE
PENSACOLA FL 32506

10. Name and Address of New Registered Agent

81 Name

HICKS, MICHAEL E. JR.

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

3601 Pebble Lane

83 City

MILTON

84 City

MILTON

FL

85 Zip Code

32583

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.

HICKS, MICHAEL E. JR.
(NOTE: Registered Agent signature required when reinstating)

21 JAN 99
DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME P
BEASLEY, MICHAEL W
STREET ADDRESS 683 SEAPINE CIRCLE
CITY-ST-ZIP PENSACOLA FL 32506

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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 P
HICKS JR. MICHAEL E
1.3 STREET ADDRESS 3601 Pebble Lane
1.4 CITY-ST-ZIP MILTON, FL 32583

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: SIGNATURE REQUIRED: HICKS, MICHAEL E. PRESIDENT (850) 483-2618
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)