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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700000758 (7)
1. Corporation Name

FLORIDA ROBOTICS, INC.

FILED Apr 28 1998 8:00am Secretary of State



				<u> </u>	##
Principal Place	e of Business	Mailing Address		1 15011501 No (511) (651) 6511 6511 6511 6511	A1 5040 0510 1550 1510 1511 1511
20751 STATE	ROAD 520 #107	20751 STATE ROAD 520	# 107		
ORLANDO FL 32833 ORLANDO FL 32833				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	1
				01/01/1997	
2. Principal Pl	lace of Business	2a. Mailing Address , 1	01 -	4. FEI Number	Applied For
21 2075	1 State Rd. 520	26 20751 Stat	e Rd, SZO	59-3435 432	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #_etc.			SR 75 Additional
22	Suite 107	27 Suite	· 107	5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Orla	ndo th	28 Or Condo	FL	Trust Fund Contribution	Added to Fees
7in	Country	29 32833	Country	B. This corporation owes or has paid the	
24 328	33 25 USA	29 32833	30 USA	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registe	red Agent
MARTIN, RUSS 81 Name RUSS Martin					
40004 AT 100 DA 1 140					
ORLANDO FL 32833 2075(ress (P.O. Box Number is Not Acceptable)	
•			83 6//	te 107	- :
			84 City	76 701	les Zin Code -
				rlando	FL 15 32833
11. Pursuant l	to the provisions of Sections 607 050	2 and 69 1508, Florida Statute	s, the above-named corp	poration submits this statement for the purpo	se of changing its registered
office or re	egistered agent, or both, to the State m familiar with, and accept the object	at Horda, Guch change was at	uthorized by the corporal rida Statutes.	poration submits this statement for the purpo tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE		Kuss	Martin	4	-22-98
	Signature, type or printed name of page cred ag		: Registered Agent signature requi	rud when reinstating) DA	A1E
12.	OMICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TMLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	LEUZZI, FAY		1.2 NAME		
STREET ADDRESS	20751 STATE ROAD 520 #1	07	1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32833		1.4 CITY - ST - ZIP		
TITLE	D	() DELETE	2.1 TITLE		Change Addition
NAME	Martin, Russ		2.2 NAME	,	i
STREET ADDRESS	20751 STATE ROAD 520 #1	07	2.3 STREET ADDRESS		
City-St-ZiP	ORLANDO FL 32833		2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		L) DELETE	4.1 TITLE		Change Addition
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		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DFLETE	: 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
 I hereby of indicated 	ertify that the information supplied von this annual report or supplement	vith this filing does not qualify for al annual report is true and accu	r the exemption stated in trate and that my signature	Section 119.07(3)(i), Florida Statutes. I furthure shall have the same legal effect as if made	er certify that the information defined and er certify that I am an

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 traffee encowered 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.

Ruse Ma

4-22-88

407.568,6146