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 # P9700002604 (1)

ADVANCED PARAMETRIC CONCEPTS, INC.

FILED Mar 27 1998 8:00am Secretary of State



| Principal Place of Business 400 BUTTONWOOD COURT LONDWOOD FL 32779 | | 7 | 1 TOP 1 TOP | A KINIAN AYNAN KANIA KBAHA MINA INDA | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--|
| | Mailing Address | | | ı görrü ildiğ girin böşir diği füğl | |
| LONDWOOD PL 327/9 | | | | | |
| | LONDWOOD FL 32779 | | DO NOT WRITE IN TH | HIS SPACE | |
| | | | 3. Date Incorporated or Qualified | 110 017102 | |
| | | | 01/01/1997 | | |
| 2. Principal Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied For | |
| 21 26 P, O, | | 9/6364 | 59-3415385 | Not Applicable | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional | |
| 22 | 27 | | U. Commodic of Cidado Domica | Fee Required | |
| City & State | City & State | E1 | 6. Election Campaign Financing | \$5.00 May Be | |
| Zip Country | Zip Zip | Country | Trust Fund Contribution | Added to Fees | |
| 24 25 | 29 32791-6364 | Country | This corporation owes or has paid the Personal Property Tax due June 30. | current year Intangible | |
| 9. Name and Address of Current | | 301 | 10. Name and Address of New Register | | |
| GEAR, PAUL | | B1 Name | | | |
| 400 BUTTONWOOD COURT | | 20 0 | Add - (0.0. D. M.) | | |
| LONDWOOD FL 32779 | | oz Street | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| | | 83 | | | |
| | | 84 City | | | |
| | | 64 City | F | 85 Zip Code | |
| 11. Pursuant to the provisions of Sections 607.0502 | and 607.1508, Florida Statut | es, the above-named | corporation submits this statement for the nurses | e of changing its registered | |
| agent. I am familiar with, and accept the obligation | ons of, Section 607.0505, Fig. | iutnorized by the cor prida Statutes. | poration's board of directors. I hereby accept the | appointment as registered | |
| SIGNATURE _ | | | | | |
| Signature, typed or printed name of registered agents | | : Registered Agent signature | | | |
| 12. OFFICERS AND I | DIRECTORS DELETE | 13. | ADDITIONS/CHANGES TO OFFICERS A | | |
| | ☐ DELETE | 1.1 TITLE | P/D | Change L Addition | |
| 444 51 77 61 74 6 5 6 6 6 6 7 7 7 | | 1.2 NAME | | | |
| LOUDINGOD PL CATTO | | 1.3 STREET ADDRESS | | | |
| CITY-ST-ZIP LUNDWUOD FL 32779 | DELETE | 1.4 CITY - ST - ZIP 2.1 TITLE | -1ch | Change Addition | |
| NAME VISSER, BRAD | | 2.2 NAME | T/S/D | • • | |
| STREET ADDRESS 652 SABAL LAKE DRIVE, SUITE 104 | | 2.3 STREET ADDRESS | 557 Sabal Lake Dr. Apt Longwood, FL 32779 | 1.211 | |
| CITY-ST-ZIP LONDWOOD FL 32779 | - 101 | 2.4 CITY - ST - ZIP | / muted E/ 32779 | , – , | |
| TITLE | DELETE | 3.1 TITLE | 244,000, PL 32111 | Change Addition | |
| NAME | _ | 3.2 NAME | | | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | 3.4. CITY-ST-ZIP | | | |
| TITLE | DELETE | 4.1 TITLE | | Change Addition | |
| NAME | | 4. 2 NAME | | | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | | | |
| 1 | | 4.4 CITY-ST-ZIP | | | |
| CITY-ST-ZIP | DELE te | 5.1 TITLE | | Change Addition | |
| CITY-ST-ZIP TITLE | | 5.2 NAME | | | |
| | | | 1 | | |
| TITLE | | 5.3 STREET ADDRESS | | | |
| TITLE NAME | | 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | | | |
| TITLE NAME STREET ADDRESS | DELETE | | | ☐ Change ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | DELETE | 5.4 CITY - ST - ZIP | | Change Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | DELETE | 5.4 CHTY - ST - ZIP 6.1 TITLE | | Change Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with indicated on this annual report or supplemental a | this filing does not qualify fo | 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP r the exemption state unate and that my sign | ed in Section 119.07(3)(i), Florida Statutes. I further inature shall have the same legal effect as if made required by Chapter 607, Florida Statutes; and th | r certify that the information | |