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

P97000015114 (6) DOCUMENT #

HYPERNETICS, INC.

FILED Feb 11 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address				A 150 to 40
909 S WOODLAND BLVD		909 S WOODLAND BLVD				
DELAND FL 32720		DELAND FL 92720				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						·
2. Principal Place of Business 2a, Mailing Address				··		02/15/1997 4. FEI Number Lapplied For
21		— ·				La state Table
Sulte, Apt. #, etc.		Suite, Apt. #, etc.				
22		27				5. Certificate of Status Desired
City & State		City & State				
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip		Country	,	
24	25	29	12	10		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	e and Address of Current			101	·· - · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registered Agent
DUNTON, LOREN A JR					Name	
909 S WOODLAND BLVD				L.		
DELAND FL 32720			82 Street Ad		Street	Address (P.O. Box Number is Not Acceptable)
DEDAMD LES	2120			83		
				00		
				84	City	85 Zip Code
## Pureupht to the provi	cione of Sections COZ OFOS	and 602 100	Marida Crat. 400	the cha		FL 8 24 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						
12.	d or printed name of registered agent a OFFICERS AND I		(NOTE:)		nt signature	e required when reinstalling) DATE.
TITLE D	OT IDENS AND		DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
· · · · · · · · · · · · · · · · · · ·	N, LOREN A JR	L	becere	1.1 THE		Change (Addition)
	VISCONSIN AVE					
	E CITY FL 32763			1.3 STREET		
CITY-ST-ZIP OHANG TITLE D	E OITTE SETOS		DELETE	1.4 CITY · S	r - ZIP	D
	R, VINCENT E	L		2.1 TITLE		
	OMIS AVE			2.2 NAME		HUNTER, VINCENT E
	VA BEACH FL 32114			2.3 STREET		520 E WISCONSIN AVE.
TITLE UAY OF	IN DEMONIFE 32114		DELETE	2.4 CITY - S	T - ZIP	Change Addition
		L	- DECEME	3.1 TITLE		Change L_ Addition
NAME CTREET ARREST CC				3.2 NAME		
STREET ADDRESS				3.3 STREET		
CITY-ST-ZIP TITLE			DECETE	3.4. CITY-S	T-ZIP	
		L	_ OLLCIE	4.1 TITLE		Change Addition
NAME				4.2 NAME		
STREET ADDRESS				4.3 STREET		
CITY-ST-ZIP		-	DELETE	4.4 CITY-ST	- ZIP	
TITLE		L	DELETE	5.1 THTLE		☐ Change ☐ Addition
NAME				5 2 NAME		0511198
STREET ADDRESS	•			5.3 STREET .	ADDRESS	852/11/88
CITY-ST-ZIP		,.		5.4 CITY - ST	- ZIP	
TITLE		Ĺ.	DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME		500002428035 -02/11/9801088007
STREET ADDRESS				6.3 STREET	ADDRESS	
CITY-ST-ZIP				6.4 CITY-ST	- ZIP	***150.00

Thereby 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 suppliemental 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 trusted 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.