## 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

## DOCUMENT # P97000044812

Corporation Name

CDT TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
1350-e4 Mahan Dr. Suite 244 Tallahassee Fl 32308	1350-e4 mahan DR, suite 244 Tallahassee FL 32308

## FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90018 030 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

05/20/1997

Suite, Apt. #, etc.    Suite, Apt. #, etc.	2. Principal P	ace of Business	2a. Mailing Address			4. FEI Number	App	lied For	
Suite, Apt. #, etc.    27	21		26			59-3450110	Not	Applicable	
City & State  Ci	Suite, Apt.	#, etc.				5. Certifcate of Status Desired	tifeate of Status Decised		
Trust From Country   Zip   Country   Zip   Country   Response to the control of the country   Zip   Country   Zip   Country   Zip   Summary   Response to the country   Zip		e				6. Election Campaign Financing	\$5.00	May Be	
Zip   County   Zip   County   Zip   County   Zip   County   S. This corporation ower the current year Intangible   Personal Property Tax.   Yes   No	23		<b>├</b> ──						
9. Name and Address of Current Registered Agent  DUNCAN, THOMAS E III 1350-E4 MAHAN DR, SUITE 244 TALLAHASSEE FI, 32308  14. City  FL 85 Zip Code  15. 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 agent. I maintain law and except the obligations of Sections 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I maintain law and except the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I maintain law and except the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I maintain law and except the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I maintain law and except the obligations of Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I maintain law and except the obligation of the corporation's board of directors. I hardy accept the appointment as registered agent. I maintain law and accept the state of the appointment as registered agent. I maintain law and accept the obligation of the purpose of changing its registered agent. I maintain law and accept the purpose of changing its registered agent. I maintain law and accept the purpose of changing its registered agent. I maintain law and accept the purpose of changing its registered agent. I maintain law and accept the purpose of changing its registered agent. I maintain law and accept the purpose of changing its registered agent. I maintain law and accept the purpose		Country	Zip	Country		8. This corporation owes the current year Intangible			
DUNCAN, THOMAS E III  1350-E4 MAHAN DR, SUITE 244  TALLAHASSEE FL 32308  14 City  TEL  35 Zirreat Address (P.O. Box Number is Not Acceptable)  15 Street Address (P.O. Box Number is Not Acceptable)  16 Zirreat Address (P.O. Box Number is Not Acceptable)  17 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 lis registered office or registered agent. I am half and a purpose of changing lis registered office or registered agent. I am half and a purpose of changing lis registered office or registered agent. I am half and a purpose of changing lis registered office or registered agent. I am half and a purpose of changing lis registered office or registered agent. I am half and a purpose of changing lis registered office or registered agent. I am half and a purpose of changing lis registered office or registered agent. I am half a purpose of changing lis registered agent. I am half a purpose of changing l	24	25	29 30	0					
DUNCAN, THOMAS E III 1350-E4 MAHAN DR, SUITE 244 TALLAHASSEE FI, 32308  44 City FL  45 City FL  46 City FL  47 City FL  48 St Zip Code  48 City FL  48 St Zip Code  49 City FL  49 City FL  49 City FL  49 City FL  40 City FL		9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registers	d Agent		
1350-E4 MAHAN DR, SUITE 244 TALLAHASSEE FI, 32308  13  14  15  15  16  17  17  18  18  18  18  18  18  18  18		0.44 T10140 F #		81	Name				
TALLAHASSEE FL 32308  83  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sactions 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes the spointment as registered agent. I am familiar rupis and professes agent and tise it applicable. (NOTE. Reparation Agent signature requires when reintrating)  9	1350-E4 MAHAN DR, SUITE 244			82	82 Street Address (P.O. Box Number is Not Acceptable)				
### City ### Change   Sections 807 0502 and 807 1508, Florida Statutes, the above-named corporation submitts this statement for the purpose of changing its registered office or registered age, 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 age, 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 age, 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 age, 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 age, 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 age, 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 age, 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 age, 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 age, or both, in the State of Florida, State of Florida, Statutes.  ###################################				-	Street Address (1.5. Box 15thbar in 1607 leash as				
### Present 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 agent, or body 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 water and other provisions of the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar water and other provisions of Section 607.0505, Florida Statutes.    SIGNATURE     Provisions of Section 607.0505, Florida Statutes.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent and the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors.   Provisions of the corporation's board of di	TALL	AHASSEE FL 32308		83					
### Present 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 agent, or body 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 water and other provisions of the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar water and other provisions of Section 607.0505, Florida Statutes.    SIGNATURE     Provisions of Section 607.0505, Florida Statutes.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent and the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors. I hereby accept the appointment as registered agent.   Provisions of the corporation's board of directors.   Provisions of the corporation's board of di				0.4	Cib		as Zin C	ode	
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 effect the obligations of, Section 607-0505, Florida Statutes.  SIGNATURE    Change   DATE   DATE				04	City	F	L		
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 effect the obligations of, Section 607-0505, Florida Statutes.  SIGNATURE    Change   DATE   DATE	11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	, the above	-named corpo	pration submits this statement for the purpose	of changing its	registered	
SIGNATURE Injuries. Typic or growing name of registered agent and title if application. (NOTE: Registered Agent alignature required when restrictions)  12. OFFICERS AND DIRECTORS	office or r	، the State اس both منه egistered agent or both	of Florida. Such change was auth	nonzed by 1	the corporation	n's board of directors. I hereby accept the app	onument as reg	istereu	
TILLE  POFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  POFFICERS AND DIRECTORS  ITTLE  POME  SIMPSON, DAVID  SIMPSON, DAVID  12 NAME  STREET ADDRESS  TALLAHASSEE FL. 32308  14 CITY-ST-ZP  TITLE  DUNCAN, CATHERINE  22 NAME  STREET ADDRESS  TITLE  ST DUNCAN, TO DELETE  TITLE  ST DUNCAN, TO DELETE  ST DUNCAN, TO DE	=	in familiar way, and do on go		• • • • • • • • • • • • • • • • • • • •		2/21/99		ļ	
TITLE	SIGNATURE	algorium, typid or printed name of registered agen	t and title if applicable. (NOTE: Re	egistered Agent	signature required	wild familiary			
SIMPSON, DAVID   12 NAME   13 STREET ADDRESS   1350-E4 MAHAN DR, SUITE 244   13 STREET ADDRESS   14 CITY-ST-ZIP     Change   Addition   Addit	12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS			
1350-E4 MAHAN DR, SUITE 244   1.3 STREET ADDRESS   1360-E4 MAHAN DR, SUITE 244   1.4 STREET ADDRESS   1.5 STREET	TITLE	P	☐ DELETE	1.1 TITLE			Change	Addition	
TALLAHASSEE FL 32308	NAME	SIMPSON, DAVID	:	1.2 NAME					
TITLE	STREET ADDRESS	1350-E4 MAHAN DR, SUITE 24	4	1.3 STREET	ADDRESS			1	
DELETE   Change   Addition	CITY-ST-ZIP	TALLAHASSEE FL 32308		1.4 CITY-ST	-ZiP				
STREET ADDRESS   CITY-ST-ZIP	TITLE	V	☐ DELETE	2.1 TITLE			Change	☐ Addition	
TALLAHASSEE FL 32308   2.4 CITY-ST-ZIP	NAME	DUNCAN, CATHERINE		2.2 NAME				ļ	
TITLE	STREET ADDRESS	2370 MAYAPPLE CT	_	2.3 STREET	ADORESS			J	
TITLE	CITY-ST-ZIP	TALLAHASSEE FL 32308	•	2. 4 CITY- ST	r-zip				
STREET ADDRESS   2370 MAYAPPLE CT   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   TALLAHASSEE FL 32308   3.4 CITY-ST-ZIP   TITLE   DELETE   4.1 TITLE   Addition   Additio	TITLE	ST	☐ DELETE	3.1 TITLE			Change	Addition \	
Addition	NAME.	DUNCAN, THOMAS E III		3.2 NAME					
TITLE	STREET ADDRESS	2370 MAYAPPLE CT		3.3 STREET	ADDRESS			}	
TITLE	CITY-ST-ZIP	TALLAHASSEE FL 32308		3.4. CITY-S1	r-zip				
### ### #### #########################	TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition	
A4 CITY-ST-ZIP	NAME			4, 2 NAME				{	
DELETE   S.1 TITLE   Change   Addition	STREET ADDRESS			4.3 STREET	ADDRESS				
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5.4 CITY-ST-ZIP	NAME							ļ	
DELETE   DELETE   Change   Addition	STREET ADDRESS			5.3 STREET	ADDRESS				
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CITY-ST-ZIP 64 CITY-ST-ZIP	NAME			6.2 NAME					
U11-51-2IP	STREET ADDRESS			6.3 STREET	ADDRESS				
The state of the s	CITY-ST-ZIP			64 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 eath; that I am an officer or director of the corporation or the reserver 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:

IGNATURE AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

942-68/6 Daytime Phone # R2E034 (11/98)