

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

FILED
Jan 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000047900 (0)

1. Corporation Name
3D-TECH. DESIGN TECHNOLOGY, CORP.

Principal Place of Business

Mailing Address

175 FONTAINEBLEAU BLVD
STE 118-9
MIAMI FL 33172

175 FONTAINEBLEAU BLVD
STE 118-9
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/30/1997

2. Principal Place of Business

2a. Mailing Address

21 11125 SW. 135 CT.

26 11125 SW. 135 CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State
23 Miami FL

27 City & State
28 Miami FL

24 Zip 33186 25 Country USA

29 Zip 33186 30 Country

4. FEI Number

65-078598

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

NAVAS, NELSON J C
9100 S.W. 137 AVE APT 1-09
MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name Dennis Bermudez
82 Street Address (P.O. Box Number is Not Acceptable)
20221 SW 117 CT
83
84 City Miami FL 85 Zip Code 33177

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 date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD
NAME TORRES M., NORBERTO A
STREET ADDRESS 8574 NW 1ST STREET
CITY-ST-ZIP MIAMI FL 33126 ☒ DELETE

TITLE VSD
NAME FABRI, ALDO
STREET ADDRESS 11125 SW 135 CT
CITY-ST-ZIP MIAMI FL 33186 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President. ☐ Change ☒ Addition
1.2 NAME ZELA FABRI
1.3 STREET ADDRESS 11125 SW 135 CT
1.4 CITY-ST-ZIP MIAMI FL 33186

2.1 TITLE Vice President. ☒ Change ☒ Addition
2.2 NAME ALDO FABRI
2.3 STREET ADDRESS 11125 SW 135 CT
2.4 CITY-ST-ZIP MIAMI FL 33186

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

SIGNATURE REQUIRED

1/15/98 305-971-6880

CR2E034 (10/97)