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 #
1. Corporation Name

P97000062653 (5)

CETI, INC.

Principal Place of Business

Mailing Address

FILED Mar 04 1998 8:00am Secretary of State



FT LAUDERDALE FL 33301			1402 E LAS OLAS BLVD. SUITE 612 FT LAUDERDALE FL 33301			
The Chapter Fe work			VI	DO NOT WRITE IN THIS SPACE		
					 Date Incorporated or Qualified 07/21/1997 	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21		26			65-0768916	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.	¬		5. Certificate of Status Desired	\$8.75 Additional Fee Required
		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the cur	ent year Intangible
24				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		
9. Name and Address of Current Registered Agent				Name	10. Name and Address of New Registered	Agent
KLAPHOLZ, JOSEPH P ESQ.				Name		,
MANELLA & KLAPHOLZ, LLP			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
, 2500 HOLLYWOOD BLVD, S212			_	1		
HU	LLYWOOD FL 33020		83	'n		
			84	1 ' '	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida S.				e-named co y the corpor	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the app	changing its registered
agent. I am lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered	Lacoust and tille of provincebia	D. Paramari A.		quired when reinstating) DATE	
12.	· · · · · · · · · · · · · · · · · · ·	AND DIRECTORS	13.	ent signature rec	quived when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/OFFICERS AND	Change Addition
NAME	GROSSMAN, HARRY T	-	1.2 NAME			
STREET ADDRESS	1402 E LAS OLAS BLVD,	SUITE 612		T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 3330		1.4 CITY -			
TITLE	ν	DELETE	2.1 TITLE	J 2-1		☐ Change ☐ Addition
NAME	DANIEL, ALAN R		2.2 NAME			
STREET ADDRESS	1402 E LAS OLAS BLVD, S	SUITE 612	2.3 STREE	T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 3330	1	2. 4 CITY-	- 1		
TITLE	গ	☐ DELETE	3.1 TITLE			Change Addition
NAME	E GROSSMAN, HARRY T					
STREET ADDRESS	1402 E LAS OLAS BLVD, S		3.3 STREE	T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 3330	1	3.4. CITY-	ST-ZIP		
TITLE		DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		j
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	·	
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	F ADDRESS		
CITY-ST-2IP			5.4 CITY-	ST-21P		i
TITLE		☐ OELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY - 8	ST-ZIP		

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 in polymental 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 or the receiver or true tee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in I hereby certify that the information indicated on this annual report or sofficer or director of the corporation Block 12 or Block 13 if changed or

SIGNATURE:

(954)-463-5568