

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 21 1998 8:00am
Secretary of State

DOCUMENT # P97000068902 (0)
1. Corporation Name

LOGICDRIVEN INCORPORATED



Principal Place of Business

1659 VIA PILAR DR.
ORLANDO FL 32825-8350

Mailing Address

1659 VIA PILAR DR.
ORLANDO FL 32825-8350

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

08/08/1997

4. FEI Number

59-3462627

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$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

KNAUF, JOHN M
1659 VIA PILAR DR.
ORLANDO FL 32825-8350

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/D ☒ DELETE
NAME KEITH A. LESWING
STREET ADDRESS 5850 SUNDOWN CIRCLE APT 227
CITY-ST-ZIP ORLANDO, FL 32822

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/T/C ☒ Change ☐ Addition
1.2 NAME CARLO FERNANDEZ
1.3 STREET ADDRESS 6249 BENT PINE DRIVE APT. 911A
1.4 CITY-ST-ZIP ORLANDO, FL 32822

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

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

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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:

John M. Knaut

7/12/98 (407) 382-1758

CR2E034 (5/98)

LogicDriven

2

August 5, 1998

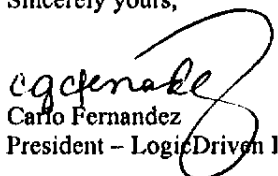
Florida Department of State
Annual report Filings
Division of Corporations

Dear Sir/Madam;

Attached with this letter is our Annual Report Form (Second Notice – Document # P97000068902 (0)) for LogicDriven Incorporated. Also included is a check for \$158.75. We are requesting that the fee for filing the annual report after the first notice be waived because we had never received the first form. We had called your office and had requested that the fee be waived but were asked to include this letter with the application.

Please let us know if this acceptable so we may act accordingly. We would appreciate any help your office may be able to extend to clarify and expedite this situation.

Sincerely yours,


Carlo Fernandez
President – LogicDriven Incorporated

LogicDriven Incorporated
1659 Via Pilar Drive
Orlando, FL 32825-8350
Tel (800) 313-5405
Tel (407) 328-1758
Fax (407) 737-1779
www.logicdriven.com