## 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 # **P97000073303**1. Corporation Name

SOTI, INC

## **FILED** Feb 03, 1999 8:00am **Secretary of State**

02-03-1999 90031 011 \*\*\*150.00



		·			10000 11100 1111 00100 1111	
rincipal Place of	Business	Mailing Address		Ì		
823 CONOVER CT. T. MYERS FL 33908		4823 CONOVER CT. Ft. Myers Fl 33908		DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE	
. MICHO I C 000	•••			3. Date Incorporated or Qualifed 08/22/1997		
				4. FEI Number	Applied For	
. Principal Place	e of Business	2a. Mailing Address		65-0776909	Not Applicable	
}	•	26			\$8.75 Additional	
Suite, Apt. #,	etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required	
٠		27			\$5.00 May Be	
City & State		City & State		6. Election Campaign Financing	Added to Fees	
City & State		28		Trust Fund Contribution	angible	
7in Country		Zip Country		8. This corporation owes the current year li	∏Yes □No	
Zip	· —	29	10	Personal Property Tax.		
	9. Name and Address of Cur			10. Name and Address of New Registerer	<u> </u>	
	9. Name and Address of Col	40 9 0 8 0 0 0 0 0 0 0	81 Nam	ne e	2.5	
MOUA	•		20 01	et Address (P.O. Box Number is Not Acceptable)		
	NTZ, EDITH	•	82 Stre	et Address (1.0. Dox 1.2. St. or	18 1 12 4 4 4 5 5 6 4 5 7 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
7050 1	CONOVER CT		83			
FI MY	ERS FL 33908				85 Zip Code	
	•	,	84 City			
		B. C. C. San Decorate			s i e ite registered	
71. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	the provisions of Sections 607.	0502 and 607.1508, Florida Statute	s, the above-nam	ed corporation submits this statement accept the appropriation's heard of directors. I hereby accept the appropriation	pointment as registered	
1.1. Pursuant to	nistered agent, or both, in the St	tate of Florida, Such change was au	ithonzed by the co ida Statutes.	ed corporation submits this statement for the purpose orporation's board of directors. I hereby accept the app		
; agent. I am	familiar with, and accept the ot	tate of Florida. Such change was adolered to the	lua Cialatos.	•		
		*		ure required when reinstating) , DATE	THE PURCHASINA 12	
SIGNATORE	Ilgnature, typed or printed name of registere	u agent and the mapping	13.	ure required when reinstating)  ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
12.		S AND DIRECTORS	1,1 TITLE	2 7 CWY	☐ Change ☐ Addition	
	DPST		1.2 NAME	` ` ` `		
NAME	MICHANTZ, EDITH			ree		
STREET ADDRESS	4823 CONOVER CT.		1.3 STREET ADDR	E55		
•=	FT. MYERS FL 33908		1.4 CITY-ST-ZIP		☐ Change ☐ Addition	
CITY-ST-ZIP		☐ DELETE	2.1 TITLE			
TITLE	•		2.2 NAME			
NAME	-		2.3 STREET ADDR	ESS		
STREET ADDRESS		الله الله الله الله الله الله الله الله	2.4 CITY-ST-ZIP		☐ Change ☐ Addition	
CITY-ST-ZIP	1.54.	DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition	
TITLE ,	NAMED SCHOOL		3.2 NAME	·		
NAME (	germanian err		3.3 STREET ADDI	DECC MEN SULAN CONTRES STATES	and 1981年1981年1981年1981年1981年1981年1981年1981	
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CITY-ST-ZIP	46.6 g 74.604		3.4. CITY-ST-ZIP		Change: 👯 🔁 Addition	
TITLE	:	☐ DELETE	4.1 TITLE			
			4, 2 NAME			
NAME	<b>₩</b> .	4.5	4.3 STREET ADD	RESS .	4 -	
STREET ADDRESS		•	4.4 CITY-ST-ZIP		Change Additio	
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TITLE		- <del>-</del> -	5.2 NAME			
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STREET ADDRESS				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
			5.4 CITY- ST- 715	)   1		
CITY-ST-7IP	WY		5.4 CITY-ST-ZIF	1 223	☐ Change ☐ Addition	
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тице	# 0 CONCERNAL # 1	☐ DELETE	6.1 TITLE 6.2 NAME		☐ Change ☐ Addition	
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TIGLE	APPENDENCE OF THE PERSON OF TH	☐ DELETE	6.1 TITLE 6.2 NAME	DRESS		

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, with all other like empowered.