## 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 # P9700093002

1. Corporation Name

DOT TECHNOLOGIES, INC.

Principal P	ace	of Business

## **FILED** Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90126 048 \*\*\*150.00



Principal P ace of Business Mailing Address										
4979 79TH AVE. DR. EAST. 493			4979 79TH AVE. DR. EAST.							
SARASOTA FL	34243	sarasota i	SARASOTA FL 34243				DO NOT WRI	TC (N) T( 1C (	20405	
								TE IN IT IS :	SPACE	
							corporated or Qualifed			
				_			1/1997			
2. Principal Place of Business 2a. Mailing A			ddress			4. FEI Number			Applied For	
21 26						65-07	91161		No	ot Applicable
Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.			5 Cantifo	to of Status Desired		\$8.75	fanoitibt
22		27	27			5. Certifica	ate of Status Desired		Fee Re	equired
City & 5 tate			City & State			6. Election Campaign Financing S5.00 May Be				
23		28	28			Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Country			8. This corporation owes the current year Intangible				
<b>⊢</b> '	25	29	30	- ·		1	orial Property Tax. ☐ Yes ☐ No			
24	9. Name and Address of Curr			<u> </u>			and Address of New F	Registered A	gent	
	9. Name and Address of Con	etti Kedisteren Ağ	<u> </u>	81	Name	TO. Haine	und your coo or really	iogiotott u r	3	
DANI	iel, moshe			"	110,,,,					
	79TH AVE. DR. EAST.			82	Street A	Idress (P.O. Box	Number is Not Accept	able)		
					<u> </u>					
SAR	ASOTA FL 34243			83						
				04	City				85 Zip	Code
				84	City			FL	20 Zip	Code
11 Dureumint	to the provisions of Sections 607.0	500 and 607 1508	Florida Statutes	the above	e-named co	progration submit	s this statement for the	purpose of o	hanging its	registered
Office or re	enistered agent or both in the Sta	te of Florida. Such (	change was auth	orized by	the corpor.	ition's board of d	lirectors. I hereby acce	of the appoin	tment as re	gistered
agent. I ar	n familiar with, and accept the obti	gat ons of, Section (	607.0505, Florida	Statutes	•					
SIGNATUF:E								DATE		
	Signature, typed or printed name of registered a		(NOTE: Re		nt signature req	iired when reinstating)	ONS/CHANGES TO OF		DIRECTO	312S IN 12
12.		AND DIRECTORS	December	13.		ADDITI	JNS/CHANGES TO OF	FICERS AIN	Change	Addition
TITLE	P		☐ DELETE	1.1 TITLE					_] Onlings	Addition
NAME	Daniel, Moshe			12 NAME						
STREET ADDRESS	4979 79TH AVE DR E			1.3 STREE	TADDRESS					
CITY-ST-ZIP	SARASOTA FL 34243			1.4 CITY-S	T-ZIP					
TITLE	VP		DELETE	2.1 TITLE					Change	☐ Addition
NAME	DANIEL, JULIE			2 2 NAME						ĺ
ì	4979 79TH AVE DR E			2.3 STREET	LADDDESS					
STREET ADORESS					i i					ļ.
CITY-ST-ZIP	SARASOTA FL 34243		O BELETE	2. 4 CITY-5	ST-ZIP				Change	☐ Addition
TITLE			☐ DELETE	3.1 TITLE						
NAME				32 NAME						
STREET ADDRESS				3.3 STREE	TADDRESS					
CITY-ST-ZIP				3 4. CITY-5	ST-ZIP					
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					T ADDRESS					
STREET ADDRESS										
CITY-ST-ZIP				4.4 CITY-S	T-ZIP				Change	Addition
TITLE			☐ DELETE	5.1 TITLE					change	
NAME				5.2 NAME	-					ļ
STREET ADDRESS				5.3 STREE	TADDRESS					
CITY-ST-ZIP				5.4 CITY- S	T-ZIP					
TITLE			☐ OELETE	61 TITLE		· <del></del>			Change	☐ Addition
NAME				6.2 NAME						1
1	-				TADDRESS					ì
STREET ADDRESS										}
CITY-ST-ZIP				64 CITY-S	1-ZIP					

14. I heret y certify that the informa ion 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 "2 or Block 13 if changes, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MOSHE DANIEL 4/5/99