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 #

P97000093019 (2)

XPERTECH CORP.

	-				
1550	SW	104	PATH.	APT.	109

1550 \$W 104 PATH, APT. 109

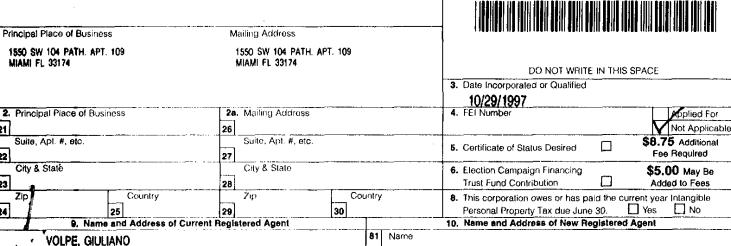
MIAMI FL 33174

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FILED May 04 1998 8:00am Secretary of State

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

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

SIGNATURE	Signature, typod or printed name of regists red agent and title it approable	(NOTL: Registered Agent signatur	re required when reinstating) DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12
TITLE	D DELI	ETE 1.1 TITLE	☐ Change ☐	Addition
NAME	VOLPE, GIULIANO	1.2 NAME		
TREET ADDRESS	1550 SW 104 PATH, APT. 109	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33174	1.4 CHY-ST-ZIP		
TITLE	☐ DELI	TE 2.1 TITLE	Change	Additio
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADORESS		
HTY-ST-ZIP		2. 4 CITY - ST-ZIP		
ITLE	☐ DFU	TE 9.1 TITLE	☐ Change	Additio
IAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3 4. CITY-ST-ZIP		
ITLE	□ DELI	TE 4.1 TITLE	Change	Additio
IAME		4. 2 NAME		
TREET ADDRESS		4.3 STREET ADDRESS		
HTY-ST-ZIP		4.4 CITY - ST- ZIP		
TITLE	DELI	TE 5.1 TITLE	Change	Additio
IAME		5.2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS	111 5/1/00	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	1/20 2/4/5	
ITTLE	DELL	TE 6.1 TITLE	-05/05/9801035015	Addition
NAME		6.2 NAME	~U5/U5/98~~U1U35~~015	
STREET ADDRESS		6.3 STREET ADDRESS	***150.00	

6.4 CITY - \$T - ZIP 14. I hereby certify that the information supplied with this filing does not indicated on this annual report or supplemental annual report is true officer or director of the corporation or the receiver in trustee employ Block 12 or Block 13 if changed, or he an alternment with an addiction. hallfy for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an grid to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

CITY-ST-ZIP