PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT. OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000002225

JUSTICE TECHNOLOGY CORP.

	<u> </u>								
Principal Place	e of Business	Mailing Address				I I I I I I I I I I I I I I I I I I I			
8045 ABBOTT AVENUE			8045 ABBOTT AVENUE						
#19			#19 Miami Beach Fl 33141			DO NOT WRITE IN THIS SPACE			
MIAMI BEACH FL 33141 MIAMI BEACH FL 33141			171			3. Date Incorporated or Qualifed			
						01/08/1998	•		
2. Principal Pl	tace of Business	Za. Mailing Address				4. FEI Number	A	oplied For	
21		26				65-0814118	N	ol Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired	,	Additional	
22		27				Fee Required			
City & State	19.,	City & State				6. Election Campaign Financing		May Be	
23	· ,	28				Trust Fund Contribution		to Fees	ĺ
Zip	Country	Zip		ountry		This corporation owes the current year Personal Property Tax.	r Intangible	□No	
24	25	29 Accept Accept	30	_		10. Name and Address of New Register			
	9. Name and Address of Cur	Laur Kadistalon vilaur		B1	Name	To Harris with the second			
COR	RDOVA, MANUEL OCHOA								
	S ABBOTT AVENUE			82	Street Ad	dress (P.O. Box Number is Not Acceptable)			
#19				83					
MIAN	MI BEACH FL 33141					Name of the second seco	11-5"		
	•			84	City	ı	FL 85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida	Statutes, the	above		reporation submits this statement for the purpos	e of changing its	registered	
				90010	⊬nameo co			i Danatsiou	l
anice or re	registered agent, or both, in the St	ate of Florida. Such change to Section 607 050	was authorize	ed by t	the corpora	ation's board of directors. I hereby accept the ap	ppointment as n	.g.500.00	
	egistered agent, or both, in the St im familiar with, and accept the ob-	ate of Florida. Such change ligations of, Section 607.050	was authorize 5, Florida St	ed by tatutes.	Hamed Co the corpora	orporation submits this statement for the purposation's board of directors. I hereby accept the a	ppointment as n	93.500	ļ
SIGNATURE	egistered agent, or both, in the St im familiar with, and accept the ob- Signature, typed or printed name of registered					uited when reinstating) DATE	E		· 6
SIGNATURE	Signature, typed or printed name of registered	agent and title If applicable. AND DIRECTORS	(HOTE: Register	ed Agent			S AND DIRECTO	ORS IN 12	100
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable.	(HOTE: Register	ed Agent		uited when reinstating) DATE	E		144 150
SIGNATURE	Signature, typed or printed name of registared OFFICERS PSD OCHOA; MANUEL	agent and title If applicable. AND DIRECTORS	(NOTE: Register 13 TE 1.1	ed Agent 3.		uited when reinstating) DATE	S AND DIRECTO	ORS IN 12	754 744 MBY
SIGNATURE 12.	Signature, typed or printed name of registared OFFICERS PSD OCHOA, MANUEL 8045 ABBOTT AVE, #19	agent and title If applicable. AND DIRECTORS	(NOTE: Register 13 TE 1.1 1.2	ed Agent 3. TITLE NAME		uited when reinstating) DATE	S AND DIRECTO	ORS IN 12	70077
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registared OFFICERS PSD OCHOA, MANUEL 8045 ABBOTT AVE, #19 MIAMI BEACH FL 33141	agent and title if applicable. AND DIRECTORS DELE	(NOTE: Repeter 13 TE 1.1 1.2 1.3 1.4	NAME STREET CITY-ST	ADDRESS	uited when reinstating) DATE	E S AND DIRECTO Change	DRS IN 12	000F001 (44 Mg)
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registared OFFICERS PSD OCHOA, MANUEL 8045 ABBOTT AVE, #19 MIAMI BEACH FL 33141 VTD	agent and title If applicable. AND DIRECTORS	(NOTE: Register 13 TE 1.1 1.2 1.3 1.4 TE 2.1	NAME CITY-ST	ADDRESS	uited when reinstating) DATE	S AND DIRECTO	ORS IN 12	CDOF 024 (44 MO)
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered OFFICERS PSD OCHOA, MANUEL 8045 ABBOTT AVE, #19 MIAMI BEACH FL 33141 VTD ZAMBRANO, FREDDY	agent and title if applicable. AND DIRECTORS DELE	(NOTE: Reputer 13: TE 1.1 12: 13: 14: TE 21:	NAME TITLE STREET CITY-ST TITLE NAME	ADORESS	uited when reinstating) DATE	E S AND DIRECTO Change	DRS IN 12	CD0E004 (44.00)
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1.4. 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 conference or true the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 charged, or on an attachment with an address, with all other like empowered.

6.4 CITY-\$T-2IP

SIGNATURE

4/24/99

305-865-7486-

FILED

May 05, 1999 8:00 am Secretary of State

05-05-1999 90117 015 ***150.00