PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED May 10, 1999 8:00 am Secretary of State 05-10-1999 90266 031 ***150.00

1. Corporation	MENT # P98000 PTICAL, INC	027715				
Original Diagram	of Business	Mailing Address		[YOO) (YOS! THE INITE OFFICE CONTROL OFFICE CO	AND PARIS HERED INTO	T ULL US
Principal Place of Business Mailing Address 1715 S. FEDERAL HIGHWAY DELRAY BEACH FL 33483 Mailing Address 1715 S. FEDERAL HIGHWAY DELRAY BEACH FL 33483				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed 03/25/1998		1
	lace of Business	2a. Mailing Address		4. FEI Number 105-084 1719	Applied Not An	d For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	*	5. Certificate of Status Desired	\$8.75 Addit	tional
City & State	· · · · · · · · · · · · · · · · · · ·	City & State		6. Election Campaign Financing	\$5.00 May	y.Be
Zip	Country Ztp		Country	antry 8. This corporation owes the current year Intangible		
24	9. Name and Address of Current		30	Personal Property Tax. 10. Name and Address of New Registered		
HAW	KINS, SCOTT G	I Madistrian where		ichard Bergida		
JONES, FOSTER, JOHNSTON & STUBBS, P.A.				255 (P.O. Box Number is Not Acceptable) 715 S. Federal Hwy.		
	soluth flagler/drive - eleve	ENTH FLOOR	83			
/- WES	T PALM BEACH FL 33401	-()	84 City-	élrav Beach, FL	85 Zip Cod	23
pen	Ver Seige	2 - 1 007 1500 Florido Statuto	the above semed sem	elray Beach, FL	. >>>>	
11./ Pursuant office or re agent. I a	to the provisions of Sections quit. USU. egistered agent, or both, in the State of m familiar with, and accept the obligat	2 and 507.1505, Florida Statute of Florida, Such change was au tions of, Section 607.0505, Flori	thorized by the corporation de Statutes.	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoi	ntment as registe	red
SIGNATURE	Signature, typed or printed name of registered agen	s and title if applicable (NOTE:	Registered Agent signature require	d when reinstating) DATE		— <u> </u>
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN		
TIPLE	PSTD	☐ DELETE	1.1 TITLE		Change [
NAME	BERGIDA, RICHARD		12 NAME			00000
STREET ADDRESS	1715 S. FEDERAL HIGHWAY		1.3 STREET ADDRESS	,		
CITY-ST-ZIP	DELRAY BEACH FL 33483		1.4 CITY-ST-ZIP 2.1 TITLE	<u></u>		Addition
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I nereby certify that the information supplied with mis hing does not quality for the exemption stated in Section 118.07(3)(3), Florida Statutes. If urther 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, grappen attachment with an address, with all other like empowered.

SIGNATURE: 🔀