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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000047074

LANGUAGE RESOURCES INTERNATIONAL, INC.

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Principal Place	e of Business	Ma	iling Address				7	1 (Moltagt tib toibt (Miet bilett Antt)	BREST GREET G	imet emmit marte	reart dint chit
6853 SW 18 ST	REET	685	3 SW 18 STREET				1	•			
SUITE 111 SUITE 111					·						
BOCA RATON FL 33433 BOCA RATON FL 33433						DO NOT WRITE IN			IN THIS	SPACE	
						•	,	Date Incorporated or Qualifed 05/22/1998			
2. Principal Pl	lace of Business	2a.	Mailing Address					CEL Number	1./	- Ar	plied.For
21		26	_					65 085822	6	No	t Applicable
Suite, Apt.	#, etc.	1	Suite, Apt. #, etc.				1	Section of Order Besterd		\$8.75	Additional
22		27					5. '	Certifcate of Status Desired	<u>. </u>	Fee Re	equired
City & State	e		City & State				6.	Election Campaign Financing		\$5.00	May Be
23		28					<u> </u>	Trust Fund Contribution		Added	to Fees
Zip	Country		Zip	Co	untry	, – –	8.	This corporation owes the curren	nt year Int		_
24	25	29		30			_1	Personal Property Tax.		☐Yes	No
	9. Name and Address of Current	Regist	tered Agent		<u> </u>		10.	Name and Address of New Re	gistered .	Agent	
COM	OFDY WAITED I				81	Name					
	VDERY, WALTER I				82	Street Addre	ess (P.	O. Box Number is Not Acceptable	le)		
	S SW 18 STREET				L						
	E 111				83					•	
4 BOC	A RATON FL 33433				84	City				85 Zip	Code
U.					1	}			<u> </u>		
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	of Florid	a. Such change was	s authorize	d by	the corporation	ration n's boa	submits this statement for the pland of directors. I hereby accept	urpose of the appoi	changing its ntment as re	registered gistered
SIGNATURE								·		<u>-</u>	
· — - · · · · · · · · · · · · · · · · ·	Signature, typed or printed name of registered agent	and title if	applicable. (NC	TE: Registere	d Agen	nt signature required			DATE		
									~==~		
12.	OFFICERS AND	DIRE		13.			A	DDITIONS/CHANGES TO OFFI	CERS AN		
TITLE	PD) DIRE	CTORS DELETE	1,1 T	ITLE		A	DDITIONS/CHANGES TO OFF!	CERS AN	D DIRECTO	DRS IN 12 ☐ Addition
TITLE NAME	PD Cowdery, Walter I) DIRE		1,1 T	ITLE IAME		A	DDITIONS/CHANGES TO OFFI	CERS AN		
TITLE	PD Cowdery, Walter I 8440 NW 3RD STREET) DIRE		1.1 T 1.2 N 1.3 S	ITLE IAME ITREET	TADDRESS	A	DDITIONS/CHANGES TO OFFI	CERS AN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COWDERY, WALTER I 8440 NW 3RD STREET CORAL SPRINGS FL 33071) DIRE	[] DELETE	1.1 T 1.2 N 1.3 S 1.4 C	ITLE IAME ITREET	Į.	A	DDITIONS/CHANGES TO OFFI	CERS AN	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD COWDERY, WALTER I 8440 NW 3RD STREET CORAL SPRINGS FL 33071 SD) DIRE		1.1 T 1.2 M 1.3 S 1.4 C 2.1 T	ITLE IAME ITREET ITLE	Į.	A	DDITIONS/CHANGES TO OFFI	CERS AN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COWDERY, WALTER I 8440 NW 3RD STREET CORAL SPRINGS FL 33071 SD COWDERY, MARIA C) DIRE	[] DELETE	1.17 12 h 1.3 S 1.4 C 2.1 T 2.2 h	ITLE IAME ITREET ITLE ITLE IAME	iT-ZIP	A	DDITIONS/CHANGES TO OFFI	CERS AN	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD COWDERY, WALTER I 8440 NW 3RD STREET CORAL SPRINGS FL 33071 SD COWDERY, MARIA C 8440 NW 3RD STREET) DIRE	[] DELETE	1.1 T 1.2 M 1.3 S 1.4 C 2.1 T 2.2 M 2.3 S	ITLE ITREET ITLE ITLE ITREET	T ADORESS	A	DDITIONS/CHANGES TO OFFI	CERS AN	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COWDERY, WALTER I 8440 NW 3RD STREET CORAL SPRINGS FL 33071 SD COWDERY, MARIA C 8440 NW 3RD STREET CORAL SPRINGS FL 33071) DIRE	☐ DELETE	1.1 T 1.2 M 1.3 S 1.4 C 2.1 T 2.2 M 2.3 S 2.44	ITLE IAME ITREET ITLE IAME ITREET ITREET	iT-ZIP	A	DDITIONS/CHANGES TO OFFI	CERS AN	☐ Change	☐ Addition
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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. WALTERS COWPERY SIGNATURE: