PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P98000056735

## FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90102 007 \*\*\*150.00

Corporation	Name " F300000	1001 00						
GLOBAL IMAGE TECH., INC.								
GEODAL	MARIAT I FOLIS MAC					<b>ARIRI BI</b> IH <b>R</b> BINIT II	1888 (4881 <b>8</b> 14) (887)	
Dringing of Dise	of Business	Mailing Address				BOIRT BY IN BUILD A	1000 FIERT B(II 1007	
Principal Place		233 MARIAH CT.						
233 MARIAH C1 MERRITT ISLAN			•		•			
MENNIII IOLAN	D FL 32302	MERRITT ISLAND FL 32952			DO NOT WRITE IN	THIS SPACE		
					3. Date Incorporated or Qualifed			
					06/22/1998			
	ace of Business	2a. Mailing Address			4. FEI Number	_ Ц	Applied For	
21 1085	KELLY CREEK CIRCLE	26 1085 KELL	Y CREEK	<u>r</u> _	59-3529922		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	****	5 Additional	
22		27			<b>0.</b> Common of Campa 2001-1		Required	
City & State		City & State	7=1		6. Election Campaign Financing	•	0 May Be	
	IEDO , TL	28 OVIEDO,			Trust Fund Contribution		ed to Fees	
Zip	Country	Zip	Country		8. This corporation owes the current year			
24 3276		29 32765 30	1 Cr 2.11		Personal Property Tax.	Yes	/ESN6	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
ELINDEN HADDY R					ARRY B. ELDRED			
233 MARIAH CT.			82 Street	Addres	ss (P.O. Box Number is Not Acceptable)	_		
MERRITT ISLAND FL 32952			83	0	SPRINGDRIVE, #			
IVIE!	THIT IODAND IE SESSE		63					
			84 City	4,	20175 181 111	85 Z	ip Code	
		<u>16)</u>		FL 3	2953			
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 office or registered agent, or both, in the State of Florida, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am tamiliar with, and accept the obligations of Section 607.0505, Florida Statutes.							registered	
agent. I an familiar with, and accept the obligations of Section 607.0505, Florida Statutes.							000	
SIGNATURE / LUU / K F / CUU					· jard	<u>_                                    </u>	72	
	Signature, typed or printed name of egistered agent a OPFICERS AND		13.	required v	ADDITIONS/CHANGES TO OFFICER	S AND DIREC	TORS IN 12	
12. U	D D PFICERS AND	DELETE	1.1 TITLE	V/-	r/s/D	Chang		
TITLE	ELDRED, HARRY B	() 5552.12	1.2 NAME		KRY B, ELDRED	, —		
NAME	233 MARIAH CT.		1.3 STREET ADDRESS	22	O SPRING DRIVE, #1		Ì	
STREET ADDRESS				ME	RRITT ISLAND, FL 329	<b>%</b> 3		
CITY-ST-ZIP	MERRITT ISLAND FL 32952	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	V/1		Chan	ge	
TMLE	D LIIOVEN MATTITOM				THEM HICKEY	استعر	•	
NAME	HICKEY, MATTHEW		2.2 NAME	100	BY KELLY CREEK OF	RCLE		
STREET ADDRESS	1085 KELLY CREEK CIR.		2.3 STREET ADDRESS		WITH EN 32765			
CITY-ST-ZIP	OVIEDO FL 32765	☐ DELETE	2. 4 CITY-ST-ZIP	P/	11500, FL 32765	Chang	ge [ Addition	
TITLE	D DATHE MICHAEL	☐ DECE IE	0.0 11414	mi	CHAEL DATHE		_	
NAME	DATHE, MICHAEL	D. LICECUIA	3.2 NAME	ΠE	-1 #14, SEC1, HSI TAI L	NIL RD.	HSI-CHIH	
STREET ADDRESS	11F-1 #14, SEC, HSI TAI WU RI	J. NOI-UNIA		т.	IPEI HSIEN TAIWA			
CITY-ST-ZIP	TAIPEI HSIEN TAIWAN	□ briete	3.4. CITY-ST-ZIP	17	THE HOICK STATEMA	Chang	ge Addition	
TITLE		☐ DELETE		1		_ CJ Onland	go [], manuali	
NAME			4. 2 NAME				İ	
STREET ADDRESS			4,3 STREET ADDRESS					
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP	<del> </del>		Chan	ge Addition	
TITLE		☐ DECEIE	5.1 TITLE 5.2 NAME	}			a	
NAME			5,3 STREET ADDRESS					
STREET ADDRESS			5.4 CITY-ST-ZIP					
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	<del> </del>		Chan-	ge Addition	
TITLE			6.2 NAME				ac L'Indinois	
NAME				}			ļ	
STREET ADDRESS			6.3 STREET ADDRESS				1	
CITY, ST. 7IP			6.4 CITY-ST-ZIP	1				

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 of 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 attachmost with an address, with all other like empowered.

**SIGNATURE** 

HARDET BE EL DRED VISIFIO PARE PARED VISIFIO PARE

9 407-366-9248

:R2E034 (11/98