FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FILED PROFIT FLORIDA PEPARTMENT OF STATE Jul 22, 1999 8:00 am CORPORATION ANNUAL REPORT **Secretary of State** Secretary of State DIVISION OF CORPORATIONS 1999 07-22-1999 90010 034 ***150.00 DOCUMENT # P98000073445 1. Corporation Name INTERPRETING, INC Principal Place of Business Mailing Address 480 NW a5Th Ot 21218 St. Andrews BM Suite#221 a Raton, Fl. DO NOT WRITE IN THIS SPACE Boca Raton, Fl. 33433 3. Date Incorporated or Qualifed AUGUST Applied For 21218 St. Andrews Blue Not Applicable \$8.75 Additional 5. Certifcate of Status Desired Fee Required 22 ri Rator 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible ☐ Yes □No Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 2480 NW 25745 84 of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered or both, in the Salte of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered and accept the obligations of Section 607.0505, Florida Statutes. 11. Pursuant to the proj office or registere agent. I am famili SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 RESIDENCE ASSET OF Change Addition AND DIRECTORS 12. OFFICERS. 13. □ D€LETE 1.1 TITLE TITLE PRESIDENT 9 ANABELA JORGE 2480 NW 35 TO ST NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS 33431-6278 Boca Raton, Fl. CITY-ST-ZIE 1.4 CITY-ST-ZIP DELETE ☐ Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE TITLE ☐ Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE ☐ Addition ☐ Change TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 2ITY-ST-ZIP 4.4 CITY-ST-ZIP -jine □ DELETE 5.1 TITLE ☐ Change ☐ Addition 5.2 NAME NAME 5.3 STREET ADDRESS TREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE DELETE ☐ Change ☐ Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 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 embowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of on an attachment with any address, with all other like empowered.

SIGNATURE:

INTED NAME OF SIGNING

FICER OR DIRECTOR

TRI-COUNTY INTERPRETING, INC.

593678-90010-34 P98000073445

21218 St. Andrews Blvd. Suite 221 Boca Raton, Florida 33433

> Tel: (561) 852-5458 Fax: (561) 852-3458

> > June 18, 1999

Annual Report Section
Division of Corporations
Corporate Records
P.O. Box 6327
Tallahassee, Florida 32314

To Whom it may Concern,

I was unaware of the Profit Corporation Annual Report until I visited with my accountant. I never received the form because I have changed my address since I have incorporated. My previous address was:

Tri-County Interpreting, Inc. P.O. Box 812674
Boca Raton, Florida 33481.

My current mailing address is:

21218 St. Andrews Blvd. Suite 221 Boca Raton, Florida 33433

Enclosed is a Profit Corporation Annual Report for 1999 and a check in the amount of \$150.00 dollars. I appreciate your cooperation and assistance in this matter. If you have any questions I may be reached at (561) 852-5458. Thank you for you help.

Anabela Jorge