FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000077697**1. Corporation Name

ANASTAZ TECHNOLOGIES, INC.

Principal	Place of	f Business

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90024 023 ***150.00



	<u> </u>				{	(II 19 11) 18 11)		B) [[] [] [] [] [] [] [] [] []	
Principal Place of Business Mailing Address				1 10011001 110 10111 10111 10111	,,,,		2		
731 MARBELLA CREEK AVENUE AMPA FL 33615		7731 MARBELLA CREEK AVENUE TAMPA FL 33615		DO NOT WRITE IN THIS SPACE					
				_	3. Date Incorporated or Qualifed 09/02/1998				
2. Principal Place of Business 2a. Mailing Address		. Mailing Address			4. FEI Number			Applied For	
ก [']	26				59-3529020			Not Applicable	
Suite, Apt. #, etc.	27	Suite, Apt. #, etc.			5. Certifcate of Status Desired			75 Additional e Required	
City & State	28	City & State			Election Campaign Financing Trust Fund Contribution			00 May Be ded to Fees	
Zip Counti	y 29	Zip Country			This corporation owes the curre Personal Property Tax.	ent year Int	angible Yes	MNo	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent						
			81	Name					
VALENCIA, JOHN J 10218 MERRIMAC MANOR DRIVE RIVERVIEW FL 33569-8327		82	Street Addres	Street Address (P.O. Box Number is Not Acceptable)					
			83			-			
			84	1		FL	- -	Zip Code	
 Pursuant to the provisions of Sec office or registered agent, or both agent. I am familiar with, and acc 	in the State of Flori	ida. Such change was authorize	d by	the corporation	ration submits this statement for the 's board of directors. I hereby accep	purpose of t the appoi	changin intment a	g its registered as registered	
SIGNATURE						DATE		**************************************	
Signature, typed or printed name	<u></u>			nt signature required			ID DIDE	CTORC IN 10	
12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DI						NO DIRE	CIURS IN 12		

•	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	gistered Agent signature re	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE	1.1 TITLE	DIRECTOR Change Addition
NAME	VALENCIA, JOHN J	1.2 NAME	HOA NGUYEN
STREET ADDRESS	10218 MERRIMAC MANOR DRIVE	1.3 STREET ADDRESS	7731 MARBELLA CR AVE
CITY-ST-ZIP	RIVERVIEW FL 33569-8327	1.4 CITY-ST-ZIP	TAMPA FL 33615
TITLE	D DELETE	2.1 T/TLE	Change Addition
NAME	DUONG, VINH	2.2 NAME	•
STREET ADDRESS	7731 MARBELLA CREEK AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33615	2.4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ OELETE	5.1 TITLE	. Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME ·		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Company of the state of the sta
14 I horoby a	satify that the information curptied with this filing does not qualify for th	re exemption stated	in Section 119.07(3)(i). Florida Statutes, I further certify that the information

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Fibrida Statutes. I findle 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.

SIGNATURE: