03-17-1999 90114 015 ***150.00

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 # P9800095794 1. Corporation Name ENTRADA TECHNOLOGIES MANAGEMENT, INC.													
Principal Place of Business Mailing Address										() 92 ()) 99 ()	1818) 81)(1 1881	10111 0101 1001	
1300 ALLENDALE ROAD WEST PALM BEACH FL 33405			1300 ALLENDALE ROAD WEST PALM BEACH FL 33405						DO NOT WRIT	E IN THIS	SPACE		
									3. Date incorporated or Qualifed 11/12/1998				
2. Principal Place of Business			2a. Mailing Address						4. FEI Number		<u> </u>	oplied For	-
21		26							65-0876878			t Applicable	ł
Suite, Apt.	#, etc.	27	Suite, Ap	t. #, etc.	ت.				5. Certificate of Status Desired		Fee Re	Additional equired	
City & Stat	e	28	City & St	ate					Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip	Country		Zip		Cou	intry			8. This corporation owes the curre	ent year Int		_	
24	25	29			10				Personal Property Tax.		Yes	□No	-
	9. Name and Address of Curren	t Regis	stered Age	ent		 			10. Name and Address of New R	legistered	Agent		-
	MPF, GARY W		,			81	Street	Addres	nan, Sean P. ss (P.O. Box Number is Not Accepta	ible)			1
1300 ALLENDALE ROAD							1	<u> 300</u>	Allendale Road	<u> </u>			-
WES	ST PALM BEACH FL 33405					83		٠	a agrada a mada	. =			ŀ
						84	City W	est	Palm Beach	FL	85 Zip 334	.05	
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and ascent the obliga	2 and 6	07.1508, F da. Such c	lorida Statutes hange was aut 07.0505. Florid	s, the a thorized	boved by to	-named he corpo	corpor	ration submits this statement for the 's board of directors. I hereby accep	purpose of t the appoi	changing its intment as re	registered egistered	
Sean						P. Kiernan			3/18/99				
SIGNATURE	Signature, typed a printed name of registered age	nt and title	if applicable.	(NOTE: 1	Registered	d Agent	signature r	equired v	when reinstating)	DATE			. ;
12.	OFFICERS AN	ND DIRE			13.				ADDITIONS/CHANGES TO OF	FICERS A			-
TITLE	D			DELETE	1.1 T	MLE		D/F	· ·		Change	XXAddition	
NAME	BROWN, LARRY E				1.2 N	AME		Bro	own, Larry E.				
STREET ADDRESS	202 ANGLER AVENUE				1.3 S	TREET	ADDRESS		Angler Ave.		,		H
CITY-ST-ZIP	PALM BEACH FL 33480			_	1.4 C	TY-ST	-ZIP	Pa1	m Beach, FL 33480		E3-Channa	□ Addition	- !
TITLE			[☐ DELETE	2.1 T	MLE		T/S			Change	☐ Addition	1
NAME					2.2 N				own, Betty G.				
STREET ADDRESS					2.3 S	TREET	ADDRESS		Angler Ave.				
CITY-ST-ZIP				 	_	CITY-ST	-ZIP	Pal	m Beach, FL 33480 °	- ·	Change	☐ Addition	-
TITLE			L	□ DELETÉ	3.1 T				•		[] Change	LJ Addition	Ì
NAME						AME				*			
STREET ADDRESS							ADDRESS		1				
CITY-ST-ZIP				7 OFFICE	_	CITY-ST	r-ZIP	 			[] Change	☐ Addition	1
TITLE	ĺ		L	DELETE	4.1 T]			ال عاديد		
NAME	1					NAME					•		
STREET ADDRESS							ADDRESS	1					ļ
CITY-ST-ZIP			 -	T) not eve	_	ITY-ST	-ZIP	 			Change	Addition	
TITLÉ			L	DELETE	5.1 T	TTLE JAME					€ Anailge		
NAME	1						ADDRESS						
STREET ADDRESS						HY-ST							
CITY OT 710	1				0,4 L	411-01	- CII	i					1

CITY-ST-ZIP1 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TTRLE

NAME

REQUIRE Carry E. Brown

DELETE

3/18/99

(561)655-3791

Change

Addition