FILED Mar 05, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCU 1. Corporatio	MENT # P98000	103359			
	NG THRU TECHNOLOGY,				
Principal Plac	e of Business	Mailing Address		י נופנו ופופע ווופט וופט וופט (פוטו ופנטו שוא ושפיוששל ו	1910 (1917) (1918) (1918) (1918)
2709 WILLOW O		2709 WILLOW OAKS DRIVE	:	j	
VALRICO FL 33594 VALRICO FL 33594			DO NOT WRITE IN THE	CEDACE	
				3. Date Incorporated or Qualifed	5 SPACE
				12/11/1998	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3547193	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & Stat	18	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zio	Country	28 Zip	Country	8. This corporation owes the current year in	
[4]	25	29	30	Personal Property Tax.	Yes ANO
	9. Name and Address of Curre			10. Name and Address of New Registered	d Agent
	NI 4)40/FD		81 Name	eith Passaur	
AMERILAWYER			82 Street Add	Control of the state of the sta	100
	Almeria avenue Al gables fl 33134			a willow DAKS D	اند
COM	AL GAGLES PL 33/34		83		
			-	· 7	85 Zip-Code
			City Ve	JRICO FI	
11. Pursuant	to the provisions of Sections 507.05	502 and 607.1508, Florida Statut e of Florida, Such change was a	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	poration submits this statement for the purpose o	
			tes, the above-named corporation of the corporation	poration submits this statement for the purpose o lon's board of directors, I hereby accept the appo	
			tes, the above-named corporation of the corporation	poration submits this statement for the purpose o lon's board of directors. I hereby accept the appo	of changing its registered sintment as registered
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indicated on this annual report or supplemental <u>annual report</u> is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am ar officer or director of the cohoration or the receiver or trustee ampowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address, with all other like empowered.

GNATURE:

SKINATORE AND TYPETOR PRINTED NAME OF SECRITION OF DIRECTOR

On the same legal effect as if made under coath; that I am ar office and that my signature shall have the same legal effect as if made under coath; that I am ar office and in the same legal effect as if made under coath; that I am ar office and in the same legal effect as if made under coath; that I am ar office and in the same legal effect as if made under coath; that I am ar office and in the same legal effect as if made under coath; that I am ar office and in the same legal effect as if made under coath; that I am ar office a supplier coath; that I am are same legal effect as if made under coath; that I am ar office and in the same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I am are same legal effect as if made under coath; that I