

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # S12456

(7)

1. Corporation Name

PHILLIPS TECHNOLOGIES, INC.

Principal Place of Business

14360 SW 139TH COURT
BAY 1
MIAMI FL 33186

Mailing Address

14360 SW 139TH COURT
BAY 1
MIAMI FL 33186

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/14/1990

3a. Date of Last Report

02/04/1994

4. FEI Number

65-0224999

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

WOO-SAM, PHILLIP
9579 SOUTHWEST 124TH PLACE
MIAMI FL 33186

10. Name and Address of New Registered Agent

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

85

Zip Code

33186

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 familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Phillip Woosam

Phillip Woosam

5/20/95

Signature, typed or printed name of registered agent and this is acceptable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

P
WOOSAM, PHILLIP
9579 SW 124 PL
MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

13.

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP

P15

☒ Change ☐ Addition

2. TITLE
3. NAME
4. STREET ADDRESS
5. CITY - ST - ZIP

☐ Change ☐ Addition

3. TITLE
4. NAME
5. STREET ADDRESS
6. CITY - ST - ZIP

☐ Change ☐ Addition

4. TITLE
5. NAME
6. STREET ADDRESS
7. CITY - ST - ZIP

☐ Change ☐ Addition

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY - ST - ZIP

☐ Change ☐ Addition

6. TITLE
7. NAME
8. STREET ADDRESS
9. CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Phillip Woosam

Phillip Woosam

5/20/95

305-238-6526

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone