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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S23384

(8)

ADVANCED DIGITAL TECHNOLOGIES, INC.

FILED
Jun 11 1997 8:00am
Secretary of State



Principal Place of Business				Mailing Address							
334 EAST LAKE RD. #133				334 EAST LAKE RD. #133							
PALM HARBOR	R FL 34685		PAL	M HARBOR FL 34685	2427						
								3. Date Incorporated or Qualified 01/07/1991		ate of Last F 12/1996	leport
2. Principal Place of Business				2a. Mailing Address				4. FEI Number		A	oplied For
21			26					59-3047247		No	ot Applicable
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired	\mathbf{z}		Additional
22			27								parinbe
City & State			<u> </u>	City & State				6. Election Campaign Financing			May Be
23			28					Trust Fund Contribution			to Fees
Zip	Country		·	Zip	 			8. This corporation has liability for i	intangible ta⊁ under s. 199.032, Yes ☑ No		
24	25	d Address of Curren	29	ared Aneni	30	ı		Florida Statutes 10. Name and Address of New Re			
Neme and Address of Current Registered Agent REINPOLDT, MICHAEL A						81	Name	10. Name and Address of New No	Aistorea	ngoin	
1540 HUNTLEIGH COURT											
OLDSMAR FL 34677						82	Street Add	dress (P.O. Box Number is Not Acceptat	lo)		1
OLDSMAN FL 34077						83		· · · · · · · · · · · · · · · · · · ·			
						84	City		FL	85 Zip	Code
44 Durewant	to the provisions	of Sections 607 050	2 and 60	7 1509 Clorida Statu	toe the s	bour	named co	rporation submits this statement for the p		Changing	le registered
office or r	egistered agent	, or both, in the State	of Florida	a. Such change was	aulhorize	d by	the corpora	ation's board of directors. I hereby accep	of the app	ointment as	registered
agent. I a	im familiar with, i	and accept the obliga	ations of,	Section 607.0505, F	lorida Sta	itutes	S.				
SIGNATURE	Signature, lyped or to	rinted name of histored age	ot and tile if	apolicable (NO	L Stepistor	d and	ort sociation to or	EINPOLST uired when reinstaling)	0/5/	97	
12.	Digitation, 131,000 or p.	OFFICERS AN			13.	_ ~ ~ .		ADDITIONS/CHANGES TO OFFIC			RS IN 12
TITLE	PD			☐ DELETE	1.1 T	TLE				Change	Addition
NAME	REINPOLDT,	, willem H III			1.2 N	IAME					
STREET ADDRESS	TREET ADDRESS 1540 HUNTLEIGH COURT				1.3 STRE		ADDRESS				
CITY-ST-ZIP	OLDSMAR F	L 34677			1.4 0	31Y-\$	1- <i>Z</i> IP				
TITLE	PD			☐ DELETE	2.1 T					Change	Addition
NAME		MICHAEL A			2.2 N	IAME					
STREET ADDRESS					2.3 S1F		ADDRESS				
CITY-ST-ZIP	OLDSMAR F	L 34677			2 4 9	OITY - S	ST-71P				
TITLE				DELETE	3.1 T	ITLE				Change	Addition
NAME					3.2 A	IAME					
STREET ADDRESS					3.3 \$	TREET	ADDRESS				
CITY-ST-ZIP				3.4 CITY-S1-ZIP			67-2IP				
TITLE				☐ DELETE	4.1 7	IILE				Change	Addition
NAME					4.21	NAM!					
STREET ADDRESS					4.3 \$	TREET	ADDRESS				
CITY-ST-ZIP					4.4.0	::::Y-\$	1-21P				
TITLE				DELETE	51T	ITLE				Change	Addition
NAME					5.2 N	IAME					
STREET ADDRESS					5.3 \$	TREET	ADDRESS				
CITY-ST-ZIP					5.4 C	11Y-S	1-ZIP				
TITLE				DELETE	61 T	ME				Change	Addition
NAME					62 N	IAME					
STREET ADDRESS	· .				638	TREET	ADDRESS				
CiTY-ST-ZIP						IIY-S					
السحب تصبيحها			 	· · · · · · · · · · · · · · · · · · ·							

14. I do 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 eath; 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 SIGNAMINE LE OFFICE