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 # S23384

1. Corporation Name

ADVANCED DIGITAL TECHNOLOGIES, INC.

Principal Place of Business

Mailing Address

224 EACT LAKE DO 4822

FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90074 011 ***158.75



PALM HARBOR FL 34685		PALM HARBOR FL 34685			DO NOT WRITE IN THIS SPACE			•
						3. Date Incorporated or Qualifed 01/07/1991		
2. Princ	cipal Place of Business	2a	. Mailing Address	-		4. FEI Number	. [Applied For
••	·	26				59-3047247	Г	Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			== 5.= Certifcate of Status Desired		7.5 Additional
22		27			· ·-			•
City	& State	28	City & State	•		6. Election Campaign Financing Trust Fund Contribution	•	.00 May Be ded to Fees
Zip	Country 25	29	Zip	Country		This corporation owes the current year Personal Property Tax.	ar Intangible ☐ Yes	□No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
	REINPOLDT, MICHAEL A			81	Name	.		
1540 HUNTLEIGH COURT			82	82 Street Address (P.O. Box Number is Not Acceptable)				
	OLDSMAR FL 34677			83				
				84	City		85	Zip Code

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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 ☐ Addition Change DELETE 1.1 TITLE TITLE 1.2 NAME REINPOLDT, WILLEM H.III NAME 1540 HUNTLEIGH COURT 1.3 STREET ADDRESS STREET ADDRESS OLDSMAR FL 34677 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DFLETE 2.1 TITLE TITLE REINPOLDT, MICHAEL A 2.2 NAME NAME 1540 HUNTLEIGH COURT 2.3 STREET ADDRESS STREET ADDRESS OLDSMAR FL 34677 CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ Addition DELETE □ Change 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 4.1.TIILE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition DELETE TITLE 6.2 NAME NAME MINE OF THE 6.3 STREET ADDRESS STREET ADDRESS | PART TERM TUBE. 6.4 CITY-ST-ZIP CITY-ST-ZIP CT

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(727) 785 6399

CR2F034 /11/98