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

**FILED PROFIT** May 12 1998 8:00am ELORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # S67836 WALLTECH INTERNATIONAL CORP. Principal Place of Business Mailing Address 1751 NORTHGATE BLVD. 1751 NORTHGATE BLVD. SARASOTA FL 34234 SARASOTA FL 34234 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/22/1991 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 65-0302850 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FOGAZZI. DANIEL 1751 NORTHGATE BLVD. Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34234 83 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 territy with, and accept the obligations of, Section 607.0505, Florida Statutes. OANI-FOOR 22 od raune of registered agent and tille if applicability SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change Addition FOGAZZI, LINDA NAME 1.2 NAME 5168 SANDY SHORE AVE. STREET ADDRESS 1.3 STREET ADDRESS **SARASOTA FL 34242** CITY-ST-ZIP 1.4 CITY - ST - ZiP DELETE TITLE Change 21 TITLE Addition FOGAZZI, ERIKA NAME 2.2 NAME 470 N. RIVERMEDE UNIT 3 STREET ADDRESS 2.3 STREET ADDRESS CONCOR ONT. L4K-1B1 CITY-ST-ZIP 2.4 CITY-ST-ZIP ST DELETE ☐ Change TITLE 3.1 TITLE ☐ Addition **BOMBIN, DIANNE** 3.2 NAME 166 SHAFTSBURY AVE., STREET ADDRESS 3.3 STREET ADDRESS RICHMOND HILL ONT. L4C-0G2 CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE BITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 City-St-ZiP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS

**6.3 STREET ADDRESS** 

6.4 CITY - ST - ZIP 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 of rustoc empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

CITY-ST-ZIP

Block 12 or Block 13 if changed, or on an attachmen

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