

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

55 MAY 18 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S81617 (0)
1. Corporation Name
ADVANCED SENSOR TECHNOLOGY RESEARCH, INC.

Principal Place of Business
**2769 EAST QUAIL HOLLOW ROAD
CLEARWATER FL 34621**

Mailing Address
**2769 EAST QUAIL HOLLOW ROAD
CLEARWATER FL 34621**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification **09/20/1991** 3a. Date of Last Report **05/01/1994**

4. FFI Number **59-3085604** 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 § 194.012 Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 26
22 27
23 28
24 25 29 30

9. Name and Address of Current Registered Agent

**REIB, WILLIAM N.
2769 EAST QUAIL HOLLOW ROAD
CLEARWATER FL 34621**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number or Not Applicable)
83
84 City FL 85 Zip Code

11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am duly qualified to act as a registered agent for the corporation named herein.

SIGNATURE

12. OFFICER AND DIRECTOR	13. ADDITIONAL MANAGERS TO OFFER FOR SALE
NAME: HOLZHACKER, ALBERT	NAME:
ADDRESS: RIHAO FELIPE SILVA #43	ADDRESS:
CITY: SAN PAULO, BRAZIL	CITY:
NAME: ST	NAME:
ADDRESS: REIB, WILLIAM	ADDRESS:
CITY: 2769 E QUAIL HOLLOW	CITY:
STATE: CLEARWATER FL	STATE:
NAME:	NAME:
ADDRESS:	ADDRESS:
CITY:	CITY:
NAME:	NAME:
ADDRESS:	ADDRESS:
CITY:	CITY:
NAME:	NAME:
ADDRESS:	ADDRESS:
CITY:	CITY:
NAME:	NAME:
ADDRESS:	ADDRESS:
CITY:	CITY:

14. I, the undersigned, do hereby certify that the information supplied with this filing is complete and correct to the best of my knowledge and belief, and that I am duly qualified to act as a registered agent for the corporation named herein.

SIGNATURE:

William N. Reib
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-4-95 813-797-8505