Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90044 023 ***150.00

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 # V44064

1. Corporation Name

TITLE

NAME

STREET ADDRESS

SERCON INTERNATIONAL, INC.

		•								
Principal Place	e of Business	Mailing Address	ling Address))(B \$4 Q \$4 B		
3363 N. VICEROY DRIVE		P.O. BOX 56794								
JACKSONVILLE FL 32257 JACKSONVILLE FL 322						DO NOT WR	ITE IN THIS	SPACE		
						3. Date Incorporated or Qualifed				ļ
	· · · · · · · · · · · · · · · · · · ·		٠			06/15/1992				l
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	-	Ap	plied For	
21		26				<u>59-31277</u> 00	_		ot Applicable	ĺ
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 / Fee Re		İ
22		27 City 9 Odrsto					_		•	ł
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	-	\$5.00 Added t		İ	
Zip	Country	28	Cour	ntrv	 -	8. This corporation owes the cur			10 1 003	
24	25	— · -	30	,		Personal Property Tax.	ioni your init	Yes	□No	ļ
	9. Name and Address of Curren		<u> </u>			10. Name and Address of New	Registered A	Agent		
-	_			81	Name					
BIRD, RONNETTE			}	82	Street Addre	ss (P.O. Box Number is Not Accept	able)			1
	PHILLIPS HIGHWAY	•			3363 N	N. Viceroy Drive				
	E-102		[83					İ	
JAEI	KSONVILLE FL 32256		-	84	City			85 Zip	Code	t
_					Jack	ksonville	<u>FL</u>	322		
office or r agent-lia	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar, with and accept the obliga	of Florida. Such change was au	tnorizea	Dy t	the corporation	's board of directors. I hereby acce	pt the appoin	itment as re	gistered	 ≠ <u>*</u>
SIGNATURE	Signature, typed or printed name of registered agei	nt and title if applicable. (NOTE: f	Registered	Ágent	signature required	when reinstating)	DATE			1
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN			
TITLE	D	☐ DELETE	1.1 TIT	ĽΕ				Change	☐ Addition	:
NAME ,	BIRD, RONNETTE		1.2 NA							1
STREET ADDRESS			ı		ADDRESS					;
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP 2.1 TITLE		-ZIP		_	Change	☐ Addition	;
TITLE		["] DETELE	2.1 III 2.2 NA							
NAME					*DDDCCO					
STREET ADDRESS			2.3 ST		ADDRESS					
CITY-ST-ZIP		☐ DELETE	3.1 TIT		1-21-			Change	Addition	1
NAME			3.2 NA							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			3,4, Cf	TY-ST	r-ZIP					
TITLE		☐ DELETE	4.1 TIT			-		☐ Change	☐ Addition	}
NAME			<u>4.2N</u>	ME_				متستند تعضيد		-
STREET ADDRESS			4.3 ST	REET	ADDRESS					
CITY-ST-ZIP			4,4 CF	ry-st	-ZIP		_			-
TITLE		☐ DELETE	5.1 117					☐ Change	☐ Addition	
NAME			5.2 NA							-
STREET ADDRESS			1		ADDRESS					ļ
CITY-ST-ZIP		C) DELETE	5.4 CF 6.1 TH		-ZIP		_	Change	☐ Addition	1
TITLE	1	1 1 17-11-11-	3 . III					Lionange		1

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 exportation 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 changes, or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

RONNETTE BIRD SIGNATURÉ

760-7011