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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

CITY-ST-ZIP

SIGNATURE.

14. I hereby certify that the information suindicated on this annual report or surofficer or director of the corporation.

Block 12 or Block 13 if changed, or process.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

FIDELIO TECHNOLOGIES, INC.

**FILED** Feb 12 1998 8:00am Secretary of State

Principal Plac	ce of Business	Mailing Address		t ident alight tasset treat alors Billit Shir diffit Bi	ana aran asan sibu naan caar
2840 GOLDEN GATE PARKWAY SUITE #211 NAPLES FL 33942		2640 GOLDEN GATE PARKWAY Suite #211 Naples Fl. 33942		DO NOT WRITE IN THIS SPACE	
US		US		3. Date incorporated or Qualified	
				10/15/1992	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt #, etc.		65-0365252	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	(e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	7(p	Country	8. This corporation owes or has paid the d	
24	[25] g. Name and Address of Curre	4	30	Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes No
<b></b>		III Negistered Agent	81 Name	10. Name and Address of New Registere	A Agent
MARSHALL, DAVID				Iress (P.O. Box Number is Not Acceptable)	
2640 GOLDEN GATE PKWY STE. 211			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	X-14 V 2
1	E. 211 VPLES FL 34105		63	640 Golden Coate to	ray -
1 1	2 220 12 54105			ite 211	: 
			84 City	Janles F	L 34105
11. Pursuant	to the provisions of Sections 607.056	02 and 607 1508, Florida Statutes	the above-named corr	poration submits this statement for the purpose	of changing its registered
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	11 Osex WIG	africa de la companya		2131	\$€
	Signature, typed in priviled same of registers. Eng		Flagistered Agent signature requi		
TITLE	OFFICE HS AN	ND DIHECTORS  DELETE	13. 1.1 Table	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12  Change
NAME	KOŁSON, RONALD J	ב טנננונ	1.1 MLE 1.2 NAME		C CHARIGE D MUNICION
STREET ADDRESS	12000 BALTIMORE AVE		1.3 STREET ADDRESS		;
CITY-ST-ZIP	BELTSVILLE MD		1.4 CITY-ST-ZIP		. 1
TITLE	VP	DELETE	2.1 TITLE		Change Addition
NAME	KAUFMAN, GARY C		2.2 NAME		:
STREET ADDRESS	12000 BALTIMORE AVE		2.3 STREET ADDRESS		;
CITY-ST-ZIP	BELTSVILLE MD		2. 4 CITY-ST-ZIP	, <u>1</u>	·
TITLE	T	DELETE	3.1 TITLE		Change Addition
NAME	TAYLOR, KENNETH		3.2 NAME		
STREET ADDRESS	12000 BALTIMORE AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	BELTSVILLE MD	Delete	3.4. CITY-ST-ZIP		Abasa D Addition
TITLE NAME	AT POPERT	☐ DELETE	4.1 TITLE	•	☐ Change ☐ Addition
STREET ADORESS	POST, ROBERT 12000 BALTIMORE AVE		4. 2 NAME		'
CITY-ST-ZIP	BELTSVILLE MD		4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE	S S	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	WILBERT, JUDITH	<del></del>	5.2 NAME		
STREET ADDRESS	12000 BALTIMORE AVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	BELTSVILLE MD		5.4 CITY - ST - ZIP		:
TITLE		☐ DELFTE	6.1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS	l		63 STREET ADDRESS		:

outcos not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information port is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an stee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in