

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L43571** (3)

1. Corporation Name

SUNTECH 3, INC.



Principal Place of Business

**222 S WESTMONTE DR
SUITE 211
ALTAMONTE SPRINGS FL 32714
US**

Mailing Address

**222 S WESTMONTE DR
SUITE 211
ALTAMONTE SPRINGS FL 32714
US**

3. Date Incorporated or Qualified
01/15/1990

3a. Date of Last Report
04/18/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2984510

Applied For
Not Applicable

22

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

24

29

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☒ Yes ☐ No

25

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KOVATCH, MARYE ANN
105 BILL CIRCLE
DAYTONA BEACH FL 32124**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

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

Signature, typed or printed name of registered agent, and title, if any.

(Do Not Register Agent Signature Herein, I When Registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	V	☐ DELETE
NAME	SELZ, NINA A	
STREET ADDRESS	4307 CALETA, APT. 201	
CITY-ST-ZIP	IRVING TX	
TITLE	P	☐ DELETE
NAME	KOVATCH, MARYE ANN	
STREET ADDRESS	105 BILL CR.	
CITY-ST-ZIP	DAYTONA BCH FL	
TITLE	V	☐ DELETE
NAME	BROWN, KEVIN J	
STREET ADDRESS	336 BUTTWOOD DR	
CITY-ST-ZIP	KISSIMMEE FL	
TITLE	V	☒ DELETE
NAME	JAEGER, RICHARD L	
STREET ADDRESS	3008 FOXHILL CIRCLE APT 109	
CITY-ST-ZIP	APOPKA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marye Ann Kovatch **MARYE ANN KOVATCH**

4/15/96 **862-1144**

CR2E034 (12/95)