## 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

## **FILED** Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90014 014 \*\*\*150.00

DOCUI	MENT # L91533						
1. Corporation Name  VOYTEK DESIGNS, INC.							
TOTTER	DEGIGITO, IIVO.				+ (AB)(181)	ON ALDIC BLON DIA	
Principal Place	e of Business	Mailing Address			1 1981,881 212 1881 1882 1882 1882 1882 1882	<u> </u>	
104 ROYAL PARK DR 104 ROYAL PARK DR							
APARTMENT 30 FT LAUDERDAL		APARTMENT 3G FT LAUDERDALE FL 33309			DO NOT WRITE IN THIS SPACE		
I LAGUENDAL	L 11 3000	( ) Diodenbine ( e soot			3. Date Incorporated or Qualifed		
					08/07/1990		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	lied For
21		26			65-0243828	\$8.75 Ad	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Requ	-
City & State	<u> </u>	City & State			6. Election Campaign Financing	\$5.00 M	
23	28				Trust Fund Contribution	Added to	
Zip	Country Zip Cou			,	8. This corporation owes the current year Inta	angible	
24	25 29 30				Personal Property Tax.	☐ Yes ☐	□No
	9. Name and Address of Current	Registered Agent		T	10. Name and Address of New Registered	\gent	
070	ZEDANCKI MOVTEK		81	Name			
SZCZEPANSKI, VOYTEK 104 ROYAL PARK DRIVE			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)		
APARTMENT 3G			83	ļ			٠
FT. LAUDERDALE FL 33309			83		•		
1			84	City	FL	85 Zip Co	ode
A4. Duranget to the provisions of Sections 507 0502 and 507 1508. Florida Statutes the above-named corporation submits this statement for the purpose of changing its regis							egistered
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.							
_	m tamiliar with, and accept the obligation	ons or, section 607.0505, Florid	a Statutes			•	
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: R	egistered Age	nt signature requ	uired when reinstating) DATE		
12.	OFFICERS AND		13.	····	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	D	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	SZCZEPANSKI, VOYTEK		1.2 NAME				
STREET ADDRESS			1.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	FT LAUDERDALE FL	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE			Change	Addition
NAME		<u></u>	2.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			2. 4 CITY-	1	•-		
TITLE		DELETE 3.11			· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			3.2 NAME		•		
STREET ADDRESS			3.3 STREE	T ADDRESS			1
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				•
STREET ADDRESS				TADDRESS	•		
CITY-ST-ZIP				i-ZIP		Change	☐ Addition
TITLE			5.1 TITLE 5.2 NAME				
NAME STREET ADDRESS				TADORESS			
(			5.4 CITY- S	i			
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME				,
STREET ADDRESS	Ì		6.3 STREE	T ADDRESS			ļ

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 tripstee 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR TRINITE ING OFFICER OR DIRECTOR

954-485-2528