

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

**FILED**  
**Mar 02, 1999 8:00 am**  
**Secretary of State**

03-02-1999 90106 047 \*\*\*158.75

PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **P96000058359**

1. Corporation Name  
**GENTECH POWER, CORP.**



Principal Place of Business  
**7930 SW 95TH AVE.  
 MIAMI FL 33173**

Mailing Address  
**7930 SW 95TH AVE.  
 MIAMI FL 33173**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 21 **8427 NW 68 Street**

2a. Mailing Address  
 26 **8427 NW 68 Street**

23 **MIAMI, FL.**

28 **MIAMI, FL.**

24 **33166** 25 **U.S.A.**

29 **33166** 30 **U.S.A.**

3. Date Incorporated or Qualified  
**07/10/1996**

4. FEI Number  
**65-0690032**

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

**PEREZ, EMILIO  
 901 NW 32ND AVE.  
 MIAMI FL 33125**

10. Name and Address of New Registered Agent

81 Name **HENRY SANCHEZ**

82 Street Address (P.O. Box Number is Not Acceptable)  
**7930 SW 95 AVE**

83 **MIAMI**

84 City **MIAMI**

85 Zip Code **FL 33173**

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]*

DATE **2/12/99**

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>ESTREMADOYURO, MIGUEL</b>	
STREET ADDRESS	<b>11985 N AVIARY DR</b>	
CITY-ST-ZIP	<b>COOPER CITY FL 33026</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>PEREZ, EMILIO</b>	
STREET ADDRESS	<b>901 NW 32ND AVE</b>	
CITY-ST-ZIP	<b>MIAMI FL 33125</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>SANCHEZ, PABLO</b>	
STREET ADDRESS	<b>7930 NW 32ND AVE.</b>	
CITY-ST-ZIP	<b>MIAMI FL 33125</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>PD HENRY SANCHEZ</b>
1.3 STREET ADDRESS	<b>7930 SW 95 Ave</b>
1.4 CITY-ST-ZIP	<b>MIAMI FL 33173</b>
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>SD MARIA ESTREMADOYURO</b>
2.3 STREET ADDRESS	<b>11985 N AVIARY DR</b>
2.4 CITY-ST-ZIP	<b>COOPER CITY FL 33026</b>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 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 as an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

DATE **2/12/99**

CR2E034 (11/98)