

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Sep 07, 2007  
Secretary of State**

DOCUMENT# P98000063248

Entity Name: AMERI-TECH REALTY, INC.

**Current Principal Place of Business:**

1799 -B N. BELCHER RD.  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

1799 -B N. BELCHER RD.  
CLEARWATER, FL 33765

**New Mailing Address:**

FEI Number: 59-3528712      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PEREZ, MICHAEL G  
1799-B NORTH BELCHER RD.  
CLEARWATER, FL 33765      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: PEREZ, MICHAEL G  
Address: 1799-B N. BELCHER RD.  
City-St-Zip: CLEARWATER, FL 33765

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD ( ) Change (X) Addition  
Name: BROWDER, KAREN L  
Address: 2004 NIGELS DRIVE  
City-St-Zip: DUNEDIN, FL 34698

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL G PEREZ

PD

09/07/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date