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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 181345 (0)

ATECH INC OF FLORIDA

FILED									
Apr 13 1998 8:00am	1								
Secretary of State									



Principal Place	e of Business		AINI ANDIN WINN	i u i bili u i bili bili f	j				
2323 S R 560 PO BOX 2007 CLEARWATER FL 34623 DUNEDIN FL 34697 US US					DO NOT WRIT		SPACE		
					10/28/1954				
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For			
21		26			59-0724492		No	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired	
City & State City & State					6. Election Campaign Financing Trust Fund Contribution				
Zip	Country	Zip	Cour	try	8. This corporation owes or has paid the current year Intangible				
24	25	29	30		Personal Property Tax due June 30. X Yes No				
	9. Name and Address of Curn	ent Registered Agent			10. Name and Address of New F	iegistered	Agent		
FIE	LDS, BARBARA H.]'	81 Name					
758 WOOD STREET			17	Street Ad	Idress (P.O. Box Number is Not Accept	able)			
50	NEDIN FL 34698		ļī	B3					
				34 City	· · · · · · · · · · · · · · · · · · ·	FL	85 Zip (Code	
Dissiliani	1 Castian 607 0	100 and 007 4500 Finding Class	41		tion with the state and for the				
office or re	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was	authorized	by the corpor	orporation submits this statement for the ration's board of directors. I hereby acc	ept the apr	changing it cointment as	registered	
SIGNATURE									
- 10	Signature, typed or printed name of registered a	ND DIRECTORS (NOT		Agent signature rec	quirad when reinstaling)	DATE OCCUPY	DIDECTOR	- IN 10	
12.	P OFFICENS A	DELETE	13.	£ T	ADDITIONS/CHANGES TO OFF	ICEHS AND	Change	Addition	
NAME	FIELDS, BARBARA H.		1.2 NA				C 0.0.190		
STREET ADDRESS	758 WOOD STREET			EET ADDRESS				[
CITY-ST-ZIP	DUNEDIN, FL 0			r-ST-ZIP					
TITLE	V	DELETE	21 111				Change	Addition	
NAME	HARPER, REX E.	_	2.2 NAA					_	
STREET ADDRESS	2111 DREW ST			EET ADDRESS		ť			
CITY-ST-ZIP	CLEARWATER, FL 0		- 1	Y-ST-ZIP	•			ì	
TITLE	CD	☐ DELETE	3.1 1(1)				☐ Change	☐ Addition	
NAME	COOK, DERWOOD M.		3.2 NAM	AE .					
STREET ADDRESS	1559 SOUVENIR DRIVE		3.3 STR	EET ADDRESS					
CITY-ST-ZIP	CLEARWATER, FL 00000		3.4. CIT	Y-ST-ZIP				ļ	
TITLE		DELETE	4.1 TITE	E			☐ Change	☐ Addition	
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STR	EET ADDRESS					
CITY-ST-ZIP			4.4 CIT	/-ST-ZIP					
TITLE		☐ DELETE	5.1 TITL	E			Change	Addition	
NAME			5.2 NAN	AE .				ł	
STREET ADDRESS			5.3 STR	EET ADORESS					
CITY-ST-ZIP			5.4 CIT	r-ST-ZIP					
TITLE		☐ DELETE	6.1 TITE	E			Change	Addition	
NAME			6.2 NAM	AE .					
STREET ADDRESS			6.3 STR	EET ADDRESS					
CITY-ST-ZIP				(-ST-ZIP					
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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 chapted or on an attachment with an address.

GNATURE:

Barbara H. Fields, President

4-10-98

813-446-3547