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

DOCUMENT # 844008

Country

9. Name and Address of Current Registered Agent

25

POLYTEK CORPORATION

TOETTER OOM ONAHO

Mailing Address

Principal Place of Business 2506 SUNNY SHORES DR TAMPA FL 33618

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

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Zip

2506 SUNNY SHORES DR TAMPA FL 33618-2324 US

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

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FILED Jan 22, 1999 8:00am Secretary of State

01-22-1999 90042 030 ***150.00



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

□No

Not Applicable

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

08/29/1979

59-1877006

4. FEI Number

PETRYNI, THADDEUS S 2506 SUNNY SHORES DR			81	Name			
			82	Street	Address (P.O. Box Number is Not Acceptable)	_	
TAMPA FL					<u> </u>	 	
IAM	PA PL		83		· · · · · · · · · · · · · · · · · · ·		とが関し
			84	City		85 Zip C	ode
<u> </u>	a production of the contract o				F <u>L</u>		
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 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							
12.	Signature, typed or printed name of registered agent and title if applica			t signature re	equired when reinstating) DATE		
	OFFICERS AND DIRECTOR	DELÉTE	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	PT THE THE PERSON OF THE PERSO	☐ DELETE	1.1 TITLE		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Change	☐ Addition
NAME	PETRYNI, THADDEUS S		1.2 NAME				
STREET ADDRESS	2506 SUNNY SHORES DR		1.3 STREET	ADDRESS			
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST	ZIP			
TITLE	VS	DELETE	2.1 TITLE	1		Change	Addition
NAME.	PETRYNI, MARIKA		2.2 NAME				ı
STREET ADDRESS	2506 SUNNY SHORES DR		2.3 STREET	ADDRESS	, , ,		ì
CITY-ST-ZIP	TAMPA FL		2. 4 CITY-\$1	r-ZIP	•		
TITLE	V. The point of the	☐ DELETE	3.1 TITLE			Change	Addition
NAME(1)	QUARANTOTTO, VERONIQUE		3.2 NAME	Í			1
STREET ADDRESS	2506 SUNNY SHORE DR.		3.3 STREET	ADDRESS			61.41.61
CITY-ST-ZIP	TAMPA FL		3.4. CITY- ST	r-ZIP		و عرواني	
TITLE ,	•	☐ OELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME	ļ	*		
STREET ADDRESS	ಆರ್ಮಿನಿನ್ ಎ ಜ		4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-	-ZIP			1
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	5.1 TITLE			[] Change	Addition
NAME			5.2 NAME				_
STREET ADDRESS			5.3 STREET	ADDRESS	·		
CITY-ST-ZIP	PT	·	5.4 CITY-ST-	-ZIP			
TITLE	PERMIT OFFICE OF	DELETE	6.1 TITLE	<u> </u>		Change	Addition
NAME .	- 2898 Strain - Strabiet, für		6.2 NAME				
STREET ADDRESS	As the Assessment of the Asses		6.3 STREET	ADDRESS			
CITY-ST-ZIP	"跨速"的。 建 分的		6.4 CITY-ST-	· ZIP			ſ
		es not qualify for the	e exemptio	n stated	in Section 119.07(3)(i), Florida Statutes. I further certif	y that the in	formation

Country

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indicated on this annual report or supplemental annual report is true 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, with all other like empowered.

THADDOUS S. PETRYNI 3 JAN99 863/960-0060
RDIRECTOR PRES. Date CK 2647 Define Phone #

CR2E034 (11/98)