

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90091 012 ***150.00

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1. Entity Name

BIO-TEK STUFF, INC.



Principal Place of Business

2395 APOPKA BLVD
APOPKA FL 32703

Mailing Address

2395 APOPKA BLVD
APOPKA FL 32703

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/05)

4. FEI Number

16-1631750

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~MCNEAL, ROSE~~ Robert Heideman
2395 APOPKA BLVD
APOPKA FL 32704

Name Robert Heideman

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-17-06

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME HEIDEMAN, ROBERT
STREET ADDRESS 2395 APOPKA BLVD
CITY-ST-ZIP APOPKA FL 32703

TITLE S ☐ Delete
NAME HOFFINGER, C. LORRAINE
STREET ADDRESS 2239 EMBASSY DRIVE
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE T ☒ Delete
NAME MCNEAL, ROSE M
STREET ADDRESS 2395 APOPKA BLVD
CITY-ST-ZIP APOPKA FL 32703

TITLE D ☐ Delete
NAME HOFFINGER, MARTIN
STREET ADDRESS 2239 EMBASSY DR.
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE ~~CFO Chief Financial Officer~~ ☐ Delete
NAME ~~Todd Childress~~
STREET ADDRESS ~~2395 APOPKA BLVD~~
CITY-ST-ZIP ~~APOPKA, FL 32703~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE M= CFO Chief Financial Officer ☐ Change ☒ Addition
NAME Todd Childress
STREET ADDRESS 2395 APOPKA BLVD
CITY-ST-ZIP APOPKA, FL 32703

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/06

Date

Daytime Phone #