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FILED
Mar 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F67603 (3)
1. Corporation Name
TECTON ENGINEERING CORPORATION



Principal Place of Business

% JOHN O. SUTTON, P.A.
2655 LEJEUNE ROAD, PENTHOUSE II
CORAL GABLES FL 33134

Mailing Address

% JOHN O. SUTTON, P.A.
2655 LEJEUNE ROAD, PENTHOUSE II
CORAL GABLES FL 33134-5832

2. Principal Place of Business

21 1600 N.W. 2nd Ave

Suite, Apt. #, etc.

22 18

City & State

23 BOCA RATON FL

Zip

24 33432

Country

25 Palm Beach

2a. Mailing Address

26 1600 N.W. 2nd Ave.

Suite, Apt. #, etc.

27 #18

City & State

28 BOCA RATON FL

Zip

29 33432

Country

30 Palm Beach

9. Name and Address of Current Registered Agent

SUTTON, JOHN O. P.A.
2655 LEJEUNE ROAD, PENTHOUSE II
CORAL GABLES FL 33134

3. Date Incorporated or Qualified

02/10/1982

3a. Date of Last Report

02/13/1996

4. FEI Number

59-2161090

Applied For

Not Applicable

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 has liability for intangible tax under s. 199.032, Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME CHUNDI, REDDY
STREET ADDRESS ~~0505 NW 2nd Ave~~ 1600 N.W. 2nd Ave
CITY-ST-ZIP BOCA RATON FL 33432

☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 on an attachment with an address.

SIGNATURE

Reddy Chundi

1600 NW 2nd Ave, Boca Raton, FL 33432

CR2E034 (9/96)