2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F67603

1. Entity Name
TECTON ENGINEERING CORPORATION

Principal Place of Business _	Mailing Address
3100 NW BOCA RATON BLVD	3100 NW BOCA RATON BLVD
SUITE 115	SUITE 115
BOCA RATON, FL 33431 US	BOCA RATON, FL 33431 US

DO NOT WRITE IN THIS SPACE

02092005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-2161090	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

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

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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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE	PD	
NAME	CHUNDI, REDDY	
STREET ADDRESS	3100 NW BOCA RATON BLVD, STE 115	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE		
NAME		
STREET ADDRESS		
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CITY-ST-ZIP		

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12. 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 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: _Reddy Chundi_   2-9-2005   561-368-7299
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #