

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAR 22 PH 3:51

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # F94000001617 (9)

1. Corporation Name

COLLECTECH SYSTEMS, INC.

Principal Place of Business

**SUITE 204
23945 CALABASAS ROAD
CALABASAS CA 91302**

Mailing Address

**SUITE 204
23945 CALABASAS ROAD
CALABASAS CA 91302**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/30/1994

3a. Date of Last Report

3/10/94

4. FEI Number

95-4135795

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

23

City & State

24

Zip

Country

2a. Mailing Address

25

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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 registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PO
KASHOU, MARWAN
2502 KIRSTEN LEE DRIVE
WESTLAKE VILLAGE CA 91361**

1.1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
**Vice President
Phil Solomon
8110 ROYAL TROON DR.
DULUTH, GA 30136**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**COO
MCFARLAND, KEITH
6240 W 82ND STREET
LOS ANGELES CA 90045**

2.1 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVD
JADWIN, BRAD
2258 RANCHVIEW PLACE
THOUSAND OAKS CA 91325**

3.1 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
**DIRECTOR
STEPHEN OLSON
6098 LIDO LANE
LONG BEACH, CA 90803**

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
KLUMPH, BRUCE
21025 LAS FLORES MESA DRIVE
MALIBU CA 90265**

4.1 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
RINALDI, VICTOR
3665 PASEO DE NUBLADO
THOUSAND OAKS CA 91360**

5.1 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
PHILLIPS, ROBERT
16726 CLEARY CIRCLE
DALLAS TX 75240**

6.1 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marwan Kashou, President March 7, 1995

Date

Signature / Name