

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 # F95000000638

1. Corporation Name
DTEK, INC.

Principal Place of Business
**5029 EDGEWATER DR
STE 6136
ORLANDO FL 32810
US**

Mailing Address
**5029 EDGEWATER DR
ORLANDO FL 32810
US**

FILED
Mar 25, 1999 8:00 am
Secretary of State

03-25-1999 90031 026 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/07/1995

4. FEI Number
38-2286268

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HARRIS, MARSHALL S
390 NORTH ORANGE AVE
SUITE 1100
ORLANDO FL 32801**

81 Name
Harris, Marshall S.
82 Street Address (P.O. Box Number is Not Acceptable)
5029 Edgewater Drive
83
84 City
Orlando **FL** 85 Zip Code
32810

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

Marshall S. Harris

3/18/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
C ☐ DELETE
NAME
STEWART, J. MELVIN
STREET ADDRESS
2201 CANTU COURT, SUITES 217-218
CITY-ST-ZIP
SARASOTA FL 34232

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE
DP ☐ DELETE
NAME
BRANDNER, J. WILLIAM
STREET ADDRESS
2180 W. STATE ROAD 434, SUITE 6136
CITY-ST-ZIP
LONGWOOD FL 32779

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

P/D ☒ Change ☐ Addition
Brandner, J. William
5029 Edgewater Drive
Orlando, FL 32810

TITLE
DSV ☒ DELETE
NAME
HOARD, PHILIP H
STREET ADDRESS
7450 SOUTH HOMESTEAD DR.
CITY-ST-ZIP
HAMILTON IN 46742-0487

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
VT ☐ DELETE
NAME
THRASHER, TODD D
STREET ADDRESS
2180 W STATE RD 434, SUITE 6136
CITY-ST-ZIP
LONGWOOD FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

V/T ☒ Change ☐ Addition
Thrasher, Todd D.
5029 Edgewater Drive
Orlando, FL 32810

TITLE
☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☒ Addition
S
Harris, Marshall S.
5029 Edgewater Drive
Orlando, FL 32810

TITLE
☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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, with all other like empowered.

SIGNATURE:

William Brandner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/99
Date

(407) 521-7477
Daytime Phone #

CR2E034 (11/98)