

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE BUREAU OF CORPORATIONS DIVISION OF CORPORATIONS
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DOCUMENT # **H70854** (5)
1. Corporation Name
OMNITECH DESIGNS, INC.

APPROVED
AND
FILED
95 MAY -1 PM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
6722 NW 18TH DR GAINESVILLE FL 32605	6722 NW 18TH DR GAINESVILLE FL 32603 US

2. Principal Place of Business	2a. Mailing Address
21. State: Apr 4 of	26. State: Apr 4 of
22. City & State	27. City & State
23. City & State	28. City & State
24. Zip: 32653	29. Zip: 32653

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
08/12/1985	06/15/1994
4. FEI Number	Applied For Not Applicable
59-2573407	
5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes.	☒ Yes ☐ No

9. Name and Address of Current Registered Agent

DANIEL THOMAS A.
623 MAIN ST
SUITE C-4
GAINESVILLE FL 32601

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

11. I, the undersigned, certify that the foregoing is true and correct, and that the above named corporation submits this statement for the purpose of changing its registered office or registered agent as permitted in the State of Florida. Each 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 607.08(2), Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	PD KRATKA, FRED 2312 N.W. 177TH AVENUE GAINESVILLE FL	1. NAME	☐ Change ☐ Addition
NAME	D KRATKA, TERRI 2312 N.W. 177TH AVENUE GAINESVILLE FL	2. NAME	☐ Change ☐ Addition
NAME		3. NAME	☐ Change ☐ Addition
NAME		4. NAME	☐ Change ☐ Addition
NAME		5. NAME	☐ Change ☐ Addition
NAME		6. NAME	☐ Change ☐ Addition
NAME		7. NAME	☐ Change ☐ Addition
NAME		8. NAME	☐ Change ☐ Addition
NAME		9. NAME	☐ Change ☐ Addition
NAME		10. NAME	☐ Change ☐ Addition
NAME		11. NAME	☐ Change ☐ Addition
NAME		12. NAME	☐ Change ☐ Addition
NAME		13. NAME	☐ Change ☐ Addition
NAME		14. NAME	☐ Change ☐ Addition
NAME		15. NAME	☐ Change ☐ Addition
NAME		16. NAME	☐ Change ☐ Addition
NAME		17. NAME	☐ Change ☐ Addition
NAME		18. NAME	☐ Change ☐ Addition
NAME		19. NAME	☐ Change ☐ Addition
NAME		20. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(4)(b), Florida Statutes. Further, I 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 1, or Block 13, if changed or on an attachment with an address.

SIGNATURE: *Fred Kratka* (1.22)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95 904 378 3408
Date