

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

CORPORATION
ANNUAL REPORT

~~1995~~ 1996



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

DOCUMENT # J36907

(0)

1. Corporation Name

TRITECH SERVICES INC.

Principal Place of Business

4410 N STATE RD 7 STE 100
FT LAUDERDALE FL 33319

Mailing Address

4410 N STATE RD 7 STE 100
FT LAUDERDALE FL 33319

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business

21 3111 UNIVERSITY DRIVE

Suite, Apt. #, etc.

22 SUITE 700

City & State

23 CORAL SPRINGS FL

Zip

24 33065

Country

25 BROWARD

2a. Mailing Address

26 3111 UNIVERSITY DRIVE

Suite, Apt. #, etc.

27 SUITE 700

City & State

28 CORAL SPRINGS, FL

Zip

29 33065

Country

30 BROWARD

3. Date incorporated or Qualified

10/01/1986

3a. Date of Last Report

08/08/1994 6/1/95

4. FEI Number

59-2731426

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

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

8. Name and Address of Current Registered Agent

WITZEL, ROBERT C.
7450 NORTHWEST 34TH STREET
LAUDERHILL FL 33319

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

12.1 TITLE
12.2 NAME
12.3 STREET ADDRESS
12.4 CITY - ST - ZIP

DT
WITZEL, ROBERT C.
7450 NW 34TH STREET
LAUDERHILL FL

12.5 TITLE
12.6 NAME
12.7 STREET ADDRESS
12.8 CITY - ST - ZIP

PS
WITZEL, ROBERT C.
7450 NW 34TH STREET
LAUDERHILL FL

12.9 TITLE
12.10 NAME
12.11 STREET ADDRESS
12.12 CITY - ST - ZIP

VD
SCHMIDT, JOANNE M/
9451 N W 44TH PLACE
CORAL SPRINGS FL

12.13 TITLE
12.14 NAME
12.15 STREET ADDRESS
12.16 CITY - ST - ZIP

12.17 TITLE
12.18 NAME
12.19 STREET ADDRESS
12.20 CITY - ST - ZIP

12.21 TITLE
12.22 NAME
12.23 STREET ADDRESS
12.24 CITY - ST - ZIP

12.25 TITLE
12.26 NAME
12.27 STREET ADDRESS
12.28 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS
13.4 CITY - ST - ZIP

13.5 TITLE
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY - ST - ZIP

13.9 TITLE
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY - ST - ZIP

13.13 TITLE
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY - ST - ZIP

13.17 TITLE
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY - ST - ZIP

13.21 TITLE
13.22 NAME
13.23 STREET ADDRESS
13.24 CITY - ST - ZIP

13.25 TITLE
13.26 NAME
13.27 STREET ADDRESS
13.28 CITY - ST - ZIP

13.29 TITLE
13.30 NAME
13.31 STREET ADDRESS
13.32 CITY - ST - ZIP

13.33 TITLE
13.34 NAME
13.35 STREET ADDRESS
13.36 CITY - ST - ZIP

13.37 TITLE
13.38 NAME
13.39 STREET ADDRESS
13.40 CITY - ST - ZIP

13.41 TITLE
13.42 NAME
13.43 STREET ADDRESS
13.44 CITY - ST - ZIP

13.45 TITLE
13.46 NAME
13.47 STREET ADDRESS
13.48 CITY - ST - ZIP

13.49 TITLE
13.50 NAME
13.51 STREET ADDRESS
13.52 CITY - ST - ZIP

13.53 TITLE
13.54 NAME
13.55 STREET ADDRESS
13.56 CITY - ST - ZIP

13.57 TITLE
13.58 NAME
13.59 STREET ADDRESS
13.60 CITY - ST - ZIP

13.61 TITLE
13.62 NAME
13.63 STREET ADDRESS
13.64 CITY - ST - ZIP

13.65 TITLE
13.66 NAME
13.67 STREET ADDRESS
13.68 CITY - ST - ZIP

13.69 TITLE
13.70 NAME
13.71 STREET ADDRESS
13.72 CITY - ST - ZIP

13.73 TITLE
13.74 NAME
13.75 STREET ADDRESS
13.76 CITY - ST - ZIP

13.77 TITLE
13.78 NAME
13.79 STREET ADDRESS
13.80 CITY - ST - ZIP

13.81 TITLE
13.82 NAME
13.83 STREET ADDRESS
13.84 CITY - ST - ZIP

13.85 TITLE
13.86 NAME
13.87 STREET ADDRESS
13.88 CITY - ST - ZIP

13.89 TITLE
13.90 NAME
13.91 STREET ADDRESS
13.92 CITY - ST - ZIP

13.93 TITLE
13.94 NAME
13.95 STREET ADDRESS
13.96 CITY - ST - ZIP

13.97 TITLE
13.98 NAME
13.99 STREET ADDRESS
14.00 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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

Pres. ROBERT C. WITZEL

4/29/95

805-404-8300

Date

Register/Transit