

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

FILED  
Mar 04, 1999 8:00 am  
Secretary of State

03-04-1999 90231 042 \*\*\*150.00

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DOCUMENT # J50508

1. Corporation Name

HITECH SOLUTIONS, INC.

Principal Place of Business

129 S. KENTUCKY AVENUE  
NO. 301  
LAKELAND FL 33801  
US

Mailing Address

C/O SAMUEL V. HOUGHTALING  
2024 JOHN ARTHUR WAY  
LAKELAND FL 33803

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/24/1986

4. FEI Number

59-2755802

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 owes the current year Intangible  
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

HOUGHTALING, SAMUEL V.  
2024 JOHN ARTHUR WAY  
LAKELAND FL 33803

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

TITLE DC  
NAME HOUGHTALING, SAMUEL V.  
STREET ADDRESS 2024 JOHN ARTHUR WAY  
CITY-ST-ZIP LAKELAND FL

DELETE

TITLE DS  
NAME WING, JOHN H.  
STREET ADDRESS 2337 N. CRYSTAL LK DR.  
CITY-ST-ZIP LAKELAND FL

DELETE

TITLE DV  
NAME COX, JAMES W.  
STREET ADDRESS 6416 RUNNING BEAR DR.  
CITY-ST-ZIP LAKELAND FL

DELETE

TITLE DV  
NAME SCHMIDT, MICHAEL B.  
STREET ADDRESS 2342 MAPLE HILL DRIVE  
CITY-ST-ZIP LAKELAND FL

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/C/T  
1.2 NAME HOUGHTALING, SAMUEL V.  
1.3 STREET ADDRESS 2024 JOHN ARTHUR WAY  
1.4 CITY-ST-ZIP LAKELAND, FL

Change Addition

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

Change Addition

3.1 TITLE D/P  
3.2 NAME COX, JAMES W.  
3.3 STREET ADDRESS 6416 RUNNING BEAR DR.  
3.4 CITY-ST-ZIP LAKELAND, FL

Change Addition

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

Change Addition

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

Change Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

S.V. HOUGHTALING 2/15/99 (941) 682-5502

Date

Daytime Phone #

CR2E034 (11/98)