

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # K26209
1. Corporation Name
CAN-TECH CORPORATION

(2)

Principal Place of Business

4333 ST. AUGUSTINE RD.
SUITE 13
JACKSONVILLE FL 32207
US

Mailing Address

4333 ST. AUGUSTINE RD.
SUITE 13
JACKSONVILLE FL 32207-7231
US

97 OCT -6 AM 7:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

3a. Date of Report

06/13/1988

05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip 30 Country

4. FEI Number

59-2896196

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WAMSLEY, ROBERT H. JR.
1414 PALM LANE
JACKSONVILLE FL 32216

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 obligation under Section 607.0505, Florida Statutes.

SIGNATURE

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

ROBERT H. WAMSLEY, JR.

(NOTE: Registered Agent signature required when reinstating)

10/2/97

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PHILLIPS, MICHAEL G.
STREET ADDRESS 2823 STATE ROAD 13
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

NAME WAMSLEY, ROBERT HOMER, JR.
STREET ADDRESS 1414 PALM LANE
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

NAME KIDD, PENNIE WAMSLEY
STREET ADDRESS 11688 FLYNN ROAD
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

NAME FLETCHER, MICHAEL W.
STREET ADDRESS 2829 STATE ROAD 13
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

NAME WAMSLEY, ROBERT HOMER J
STREET ADDRESS 1414 PALM LANE
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE

Michael G. Phillips

MICHAEL G. PHILLIPS mbk97 (an) 322-4481

CR2E034 (4/97)