2013 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2013 SEP 16 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K30585

1. Entity Name
IMPLA-TEK, INC.

Principal Place of Business	Mailing Address
213 GOOLSBY BLVD. DEERFIELD BEACH, FL 33442 US	213 GOOLSBY BLVD. DEERFIELD BEACH, FL 33442 US

10142013 Chg-P CR2E034 (12/11)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
4005. Dixie Hwy	
Suite, Apt. #, etc. #14	Suite, Apt. #, etc.
City & State Lake Worth Fl	City & State
Zip 33460 Country	Zip Country

4. FEI Number
65-0124080 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ESMAIL, ZABIR 213 GOOLSBY BLVD DEERFIELD BCH, FL 33442	Name Street Address (P.O. Box Number Is Not Acceptable) 4005 Dixie Hwy #14 City Lake Worth FL Zip Code 33460

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. *I am familiar with, and accept the obligations of registered agent.*

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS $550.00
Due by September 27, 2013

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	ESMAIL, ZABIR		NAME		
STREET ADDRESS	213 GOOLSBY BLVD		STREET ADDRESS	4005 Dixie Hwy #14	
CITY-ST-ZIP	DEERFIELD BCH, FL 33442		CITY-ST-ZIP	Lake Worth Fl 33460	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS	700254526927	
CITY-ST-ZIP			CITY-ST-ZIP	12/09/13--01005--004 **550.00	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME	S. HAWKES	
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP	DEC 17 2013	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME	EXAMINER	
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Zabir Esmail _____ znavsaree@yhoo.com
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — E-MAIL ADDRESS

www. .org Corporations Payments Tools Activity Information

Annual Report Filing History

Search By Document ID

k30585

Search

Session

Description

Session file for k30585 with last modified date of 9/16/2013 9:51:44 AM Eastern Sta

Transactions

Transaction Id	Document Id	Filing Fee	Filing Statu
0b2151f1-068a-4793-959b-9c55b6cdcb8c	K30585	0	2
438e3e32-c295-476e-90b2-04fd51a787e4	K30585	0	2
f3a4de18-57d6-426c-aa3b-fefbb1913c8c	K30585	0	2

2012, Corporations Internal Web © by FLDOS Core Dev Team

Already made active