2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # K54776

1. Entity Name

INTERNATIONAL TECHNICAL CERAMICS, INC.



FILED Feb 14, 2008 08:00 AM Secretary of State

Section 1	

	e of Business	Mailing Address		į.			
MAYPORT INDUSTRIAL PARK 325 MEALY DRIVE ATLANTIC BEACH FL 32233		P.O. BOX 1726 PONTE VEDRA BEACH FL 32004					
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address			EJA MIMIL MIMIL MEMEA	JIBIIBD:	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E034 (10/07)			
City & Stat	Δ.	City & State		4. FEI Number	····	Applied For	
0.1, 0.010		Only a Giale		59-2916375		Not Applicable	
Zip	Country	Ζ:ρ	Country	5. Certificate of Status Desired	\$8.75 A	dditional	
	6. Name and Address of Curren	t Registered Agent		7. Name and Address of New Registere	d Agent		
			Name				
SLAGLE, SUSAN 1201 SAN AMARO ROAD JACKSONVILLE FL 32207			Street Addres	Street Address (P.O. Box Number is Not Acceptable)			
			City	F	Zip Co		
D. The one				<u></u>			
	named entity submits this statement t ions of registered agent.	or the purpose of changing its	s registered office or regis	stered agent, or both, in the State of Florida. Ta	m tamiliar wit	n, and accept	
Ü	.,						
SIGNATURE	Signature, typed or crished name of registered open	W. willie Lungianna (BYY)	77 7	integ when constaine) DATE	,		
11 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Tarvite Propressio	TE: Pagisterad Agant signinture requ	mass when constitutes — Divite			
After	ILE NOW!!! FEE IS \$150.00 May 1, 2008 Fee Will Be \$550.0 (Payable to Florida Department	0 of State		9. Election Campaign Final Trust Fund Contribution.		5.00 May Be ded to Fees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 11	
TITLE	DP	☐ Delete	TITLE		Change	Addition	
MAME	DELKIC, FERIZ		NAME,		/		
STREET ADDRESS	325 MEALY DRIVE		STREET ADDRESS				
CITY ST-ZIP	ATLANTIC BEACH FL 32233						
TITLE			CITY-ST-ZIP				
		☐ Deiele	CITY-ST-ZIP		☐ Change	Addition	
NAME		☐ Derete		Honophoon		_	
NAME STREET ADDRESS		☐ Oerefe	TITLE NAME STREFT ADDRESS	U00000828472		_	
NAME			TITLE NAME	U00000828472 02/26/08-80003-		_	
NAME STREET ADDRESS		☐ Dereite	TITLE NAME STREFT ADDRESS	U00000828472 02/26/08-80003-		. 75	
NAME STREET ADDRESS CITY-ST-71? TITLE NAME			TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME	U00000828472 02/26/08-80003-	004 158	. 75	
NAME STREET ADDRESS CITY ST-719 TITLE NAME STREET ADDRESS			TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	U00000828472 02/26/08-80003-	004 158	. 75	
NAME STREET ADDRESS CITY-ST-7/P IITLE NAME STREET ADDRESS CITY-ST-7/P		☐ De ele	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	U00000828472 02/26/08-80003-	004 158 □ Change	. 75	
NAME STREET ADDRESS OITY-ST-7/P ITTLE NAME STREET ADDRESS OITY-ST-7/P TITLE			TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	U00000828472 02/26/08-80003-	004 158	. 75	
NAME STREET ADDRESS OITY: ST-7IP ITTLE NAME STREET ADDRESS OITY-ST-7IP TITLE NAME		☐ De ele	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	U00000828472 02/26/08-80003-	004 158 □ Change	. 75	
NAME STREET ADDRESS OITY: ST-7IP ITTLE NAME STREET ADDRESS OITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ De ele	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	U00000828472 02/26/08-80003-	004 158 □ Change	. 75	
HAME STREET ADDRESS CITY+ST-7(P) ITTLE NAME STREET ADDRESS CITY+ST-7(P) ITTLE HAME STREET ADDRESS CITY+ST-7(P) CITY-ST-7(P)		☐ Da ele ☐ Deïete	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	U00000828472 02/26/08-80003-	004 158 ☐ Change ☐ Change	. 75 Addition	
HAME STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS CITY-ST-ZIP ITTLE HAME STREET ADDRESS CITY-ST-ZIP ITTLE HAME STREET ADDRESS CITY-ST-ZIP ITTLE		☐ De ele	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE	U00000828472 02/26/08-80003-	004 158 □ Change	. 75 Addition	
HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME		☐ Da ele ☐ Deïete	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME	U00000828472 02/26/08-80003-	004 158 ☐ Change ☐ Change	. 75 Addition	
HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE LIAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS		☐ Da ele ☐ Deïete	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	U00000828472 02/26/08-80003-	004 158 ☐ Change ☐ Change	. 75 Addition	
NAME STREET ADDRESS CITY ST-7/P TITLE NAME STREET ADDRESS CITY-ST-7/P		☐ De ete Derete ☐ Derete	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-GT-ZIP TITLE NAME STREET ADDRESS CITY-GT-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	U00000828472 02/26/08-80003-	ÜÜ4 158 ☐ Change ☐ Change	Addition Addition	
NAME STREET ADDRESS CITY ST-7/P TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE		☐ Da ele ☐ Deïete	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-GT-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	U00000828472 02/26/08-80003-	004 158 ☐ Change ☐ Change	Addition Addition	
NAME STREET ADDRESS CITY ST-7/P TITLE NAME STREET ADDRESS CITY-ST-7/P		☐ De ete Derete ☐ Derete	TITLE NAME STREFT ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-GT-ZIP TITLE NAME STREET ADDRESS CITY-GT-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	U00000828472 02/26/08-80003-	ÜÜ4 158 ☐ Change ☐ Change	Addition Addition	

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 it 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:

FERIZ DELKIC DP.) 02-12-08

904 -85-0200