

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 12:57

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # L30643 (5)

1. Corporation Name

EPP-TECH ASSOCIATES, INC.

Principal Place of Business

*** EDWARD P. PLOSKI
2020 NE 26TH ST
LIGHTHOUSE POINT FL 33064**

Mailing Address

*** EDWARD P. PLOSKI
2020 NE 26TH ST
LIGHTHOUSE POINT FL 33064**

000001485290

-05/12/95--01020--021

******208.75 ****208.75**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

11/15/1989

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0165275

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**

6. This corporation has received for information the notice of the
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PLOSKI, EDWARD P.
2020 NE 26TH ST
LIGHTHOUSE POINT FL 33064**

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 this if applicable)

(NOTE: Registered Agent signature required when maintaining)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

**PLOSKI, EDWARD P.
2020 NE 26TH ST
LIGHTHOUSE POINT FL**

STREET ADDRESS

CITY, ST, ZIP

1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY, ST, ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY, ST, ZIP

☐ Change ☐ Addition

14. I do 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:

Edward P. Ploski

PRESIDENT

4/20/95

(305)

427-3390

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDWARD P. PLOSKI