

# ANNUAL REPORT

DOCUMENT # L41691

1. Entity Name  
INTEC MACHINE SERVICE, INC.



**FILED**  
**Jan 10, 2005 08:00 AM**  
**Secretary of State**

Principal Place of Business  
C/O BRICE BEISNER  
116 WILLOW TREE LANE  
LONGWOOD, FL 32750

Mailing Address  
C/O BRICE BEISNER  
116 WILLOW TREE LANE  
LONGWOOD, FL 32750



01032005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2991089 Applied For Not Applicable

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

**6. Name and Address of Current Registered Agent**

BEISNER, BRICE  
116 WILLOW TREE LANE  
LONGWOOD, FL 32750

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	BEISNER, BRICE
STREET ADDRESS	116 WILLOW TREE LANE
CITY - ST - ZIP	LONGWOOD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000000176667  
01/11/05-80006-008 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. 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 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:

*Brice Beisner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brice Beisner

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Revised 09/04