FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L73091

(5)

INTECH SYSTEMS, INC.

| Principa! Place of Business Mailing Address | | | | | | | e ammenen mer em mmt elett maarm 101mt iffe f | ··· | 1811 B1811 S1815 1 | W: W: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
|--|--|---|-----------------|---------|--|------------|---|--------------------|--------------------|---|
| C/O ROCK RICHARDSON C/O ROCK RICHARD 1101 GULF BREEZE PKWY #350 P. O. BOX 1613 | | | M | | | | | | | |
| 1101 GULF BR GULF BREEZE | | P. O. BOX 1613 GULF BREEZE FL 32562: | 1613 | | | - } | | | | |
| US BREEZE | , I'L SESSE | US | -1010 | | | 3. | Date Incorporated or Qualified | 3a. Da | ate of Last R | leport |
| | | | | | | ļ | 05/11/1990 | 04/ | 16/1996 | |
| | hace of Business | 2a. Mailing Address | | | | 4. | FEI Number | | Ar | oplied For |
| 21 | | 26 | | | ···· | | 59-3019400 | | No. | ot Applicable |
| Suite, Apt | #, etc | Swite, Apt. #, etc. | | | | 5. | Certificate of Status Desired | | | Additional |
| 22 | | [27] | | | | | | | | equired |
| City & Stat | City & State | s atare | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | | | |
| 23 Zip | Country | 28 Zip | Coui | ntru | | | This corporation has liability for it | | | |
| 24 | 25 | 29 | 30 | , ,,, y | | 8. | | ntangible Yes [| | . 199.032, |
| <u> </u> | 9, Name and Address of Curre | | | | | 10. | Name and Address of New Reg | | | |
| RIC | HARDSON, ROCK | | | 81 | Name | | | | | |
| | 1 GULF BREEZE PKWY. | | | - | Ct 1 1 1 | -t /D | O Day Market | | | |
| | . 350 | | | 82 | Street Add | aress (P | P.O. Box Number is Not Acceptab | le) | | |
| | LF BREEZE FL 32561 | | ŀ | 83 | ***** | | | | | |
| 001 | D OIRECTE IE OFFI | | | | | | | | | |
| | | | - | 84 | City | | | FL | 85 Zip | Code |
| 11. Pursuant | to the provisions of Sections 607 03 | 502 and 607,1508, Florida Stat | utes, the ab | ove- | named con | rporatio | n submits this statement for the p | urnose of | f changing if | ts registered |
| office or i | registered agent, or both, in the Sta am familiar with, and accept the obli | te of Florida, Such change was | s authorized | l by | the corpora | ation's b | poard of directors. I hereby accep | the app | ointment as | registered |
| • | ан вишки ма, аксиксосут не ооп | gandra or, addicin bur,0000, i | i ionua sian | uica. | | | | | | |
| SIGNATURE | Big. abort, typed or protect actar of mg, slened a | gent and the Trappicable (St | O1E: Registered | I Agen | t signature requi | uired when | renstating) | DATE | | ······································ |
| 12. | | ND DIRECTORS | 13. | | | | ADDITIONS/CHANGES TO OFFIC | ERS AND | DIRECTOR | RS IN 12 |
| THLE | D | ☐ DELETE | 1.1.7 1 | ſιŧ | | | | | Change | Addition |
| NAME | RICHARDSON, ROCK | | 1.2 NA | ME | | | | | | |
| STREET ADDRESS | P. O. BOX 1613 N/A | | 1.3 \$ T | REET A | ADDRESS | | | | | |
| CCY+ST-74P | Gulf Breeze Fl | | 1.4 011 | TY - S1 | - Z(P | | | | | |
| Title | | DELETE | 2.1 111 | LE | | | | | Change | Addition |
| MAME | | | 2.2 NA | ME | | | 1.11 | | | |
| SEET ADURESS | | | 2.3 ST | REFT A | ADDRESS | | • | | | |
| GHY-\$1-20F | | | 2 4 CI | ITY-SI | r - ZIP | | | | | |
| TILE | | ☐ DELETE | 3 1 TII | LE | | | | | ☐ Change | Addition |
| MAME | } | | 3.2 NA | ME | | | | | | |
| STREET ADDRESS | | | 3 3 \$1 | REET A | NODRESS | | | | | |
| CITY-ST-ZIP | | | 3.4. CI | ITY-\$1 | r-ZIP | | | | | |
| TITLE | | DELETE | 4.1 [1] | ILE | | | | | Change | Addition |
| N4ME | | | 4. 2 N | AME | | | | | | |
| STREET ADDRESS | | | 4.3 ST | REET A | ADDRESS | | | | | |
| C(1) + S* - 2(P) | | | 4.4 CH | TY-ST | - ZIP | | | | | |
| TITLE | | DELFTE | 5.1 TIT | rle . | | · | | | Change | Addition |
| NAME | | | 5.2 NA | ME | | | · · | | | |
| STREET ADDRESS | | | 5.3 \$1 | REET A | ADORESS | | | | | |
| City - SE- ZIP | | | 5 4 CI | | | | | | | |
| TITLE | | OELETE | 61717 | | | | | | Change | Addition |
| NAVE | | | 6 2 NA | | 1 | | | | - | |
| STREET ADDRESSS | | | | | ADDRESS | | | | | |
| On the second | | | 0001 | | | | | | | |

SIGNATURE:

appears in Block 12 or Block 13 if changed, or on an attachment with an address

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

FILED

Jan 22 1997 8:00am

Secretary of State