

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 19 AM 11:47

DOCUMENT # L84971 (5)

1. Corporation Name
INTOTECH, INC.

Principal Place of Business
10100 N. W. 37TH STREET
CORAL SPRINGS FL 33065

Mailing Address
10100 N. W. 37TH STREET
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 07/03/1990	3a. Date of Last Report 08/17/1994
4. FEI Number 59-3020935	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
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 County	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 County
--	---

9. Name and Address of Current Registered Agent

LOVELL, VICKIE
10100 N W 37TH STREET
CORAL SPRINGS, 33065

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, on 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 607.0501, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and that of applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST	1.1 TITLE	☐ Change ☐ Addition
NAME	LOVELL, VICKIE	12 NAME	
STREET ADDRESS	10100 NW 37TH STREET	13 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL	14 CITY-ST-ZIP	
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information submitted with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.07(4)(k), Florida Statutes. I further certify that the information indicated on the original 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 of this report, or on an amendment with an addition.

SIGNATURE:

(Signature and typed or printed name of signing officer or director)

DATE

Signature