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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L91963

1. Corporation Name
GLENTech SERVICES, INC.



Principal Place of Business
1205 SEABREEZE BLVD. 24 S.E. 6th ST
FT. LAUDERDALE FL 33316
US

Mailing Address
1205 SEABREEZE BLVD
FT. LAUDERDALE FL 33316
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 24 S.E. 6th ST
Suite, Apt. #, etc.
22
City & State
23 BOCA RATON, FL
Zip Country
24 33432 25 US

2a. Mailing Address
26 24 S.E. 6th ST.
Suite, Apt. #, etc.
27
City & State
28 BOCA RATON, FL
Zip Country
29 33432 30 US

3. Date Incorporated or Qualified
07/30/1990
4. FEI Number
59-3025574
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 owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ORTEGA, GLENIS
1205 SEABREEZE BOULEVARD
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name GLENIS ORTEGA MCEWEN
82 Street Address (P.O. Box Number is Not Acceptable)
83 1190 S. OCEAN BLVD, 8A
84 City BOCA RATON FL 85 Zip Code 33432

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME ORTEGA, GLENIS A
STREET ADDRESS 1205 SEABREEZE BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME GLENIS ORTEGA MCEWEN
1.3 STREET ADDRESS 24 S.E. 6th ST.
1.4 CITY-ST-ZIP BOCA RATON, FL 33432
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: Glenis Ortega McEwen Glenis Ortega McEwen 4/29/99 (561) 750-7212