

FILE NOW: FILING FEE AFTER MAY 1 IS

PROFIT
CORPORATION
ANNUAL REPORT
2000



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

FILED
May 02, 2000 8:00 am
Secretary of State

DOCUMENT # M10948

1. Corporation Name

RETRONIC INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

218 Commercial Blvd. Suite 204 218 Commercial Blvd. Suite 204
Lauderdale-By-The-Sea FL 33308 Lauderdale-by-The Sea FL 33308

3. Date Incorporated or Qualified

3a. Date of Last Report

02/05/1985

4. FEI Number

59-2492209

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

2a. Mailing Address

21 1440 Coral Ridge Dr.

26 1440 Coral Ridge Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #290

27 #290

City & State

City & State

23 Coral Springs FL

28 Coral Springs FL

Zip Country

Zip Country

24 33071

25

29 33071

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Burkart, Guenter

~~218 Commercial Blvd.~~

~~Suite 204~~

~~Lauderdale By The Sea FL 33308~~

81 Name

Burkart, Guenter

82 Street Address (P.O. Box Number is Not Acceptable)

1440 Coral Ridge Dr. #290

83

84 City

Coral Springs

FL

85 Zip Code

33071

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 *Guenter Burkart* Guenter Burkart 4/26/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME Burkart, Guenter
STREET ADDRESS ~~218 Commercial Blvd. Suite 204~~
CITY-ST-ZIP ~~Lauderdale By The Sea~~

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME Burkart, Guenter
1.3 STREET ADDRESS 1440 Coral Ridge Dr. #290
1.4 CITY-ST-ZIP Coral Springs FL 33071

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 200003280332--0
2.4 CITY-ST-ZIP -06/07/00--01024--008
****150.00 ****150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Guenter Burkart

4/26/00

954 575 1146

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)