

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000090466

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: MASTER TEC, INC.

**Current Principal Place of Business:**

3899 FIRST AVE SW  
NAPLES, FL 34117

**New Principal Place of Business:**

**Current Mailing Address:**

3899 FIRST AVE SW  
NAPLES, FL 34117

**New Mailing Address:**

FEI Number: 59-3736776      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MCSHAND, GLENN  
3899 FIRST AVE SW  
NAPLES, FL 34117      US

**Name and Address of New Registered Agent:**

MCSHAND, GLENN R  
3899 FIRST AVE SW  
NAPLES, FL 34117      US

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.

SIGNATURE: GLENN ROBERT MCSHAND      04/29/2005  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: MCSHAND, GLENN ROBERT  
Address: 3899 FIRST AVE SW  
City-St-Zip: NAPLES, FL 34117

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D      (X) Change ( ) Addition  
Name: MCSHAND, GLENN R  
Address: 3899 FIRST AVE SW  
City-St-Zip: NAPLES, FL 34117

Title: D      ( ) Change (X) Addition  
Name: ANDREA, THOMAS  
Address: 4819 LASQUETI WAY  
City-St-Zip: NAPLES, FL 34119

Title: D      ( ) Change (X) Addition  
Name: FALCO, ORAZIO  
Address: 3899 FIRST AVE. SW  
City-St-Zip: NAPLES, FL 34117

Title: D      ( ) Change (X) Addition  
Name: HURTADO, WILMER  
Address: 3899 FIRST AVE. SW  
City-St-Zip: NAPLES, FL 34117

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENN MCSHAND      D      04/29/2005  
Electronic Signature of Signing Officer or Director      Date