## <sup>2</sup> 2806 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 24, 2006 08:00 AM DOCUMENT # P02000015228 Secretary of State 1. Entity Name MIRTECH CORP. Principal Place of Business Mailing Address 19926 VILLA LANTE PL 19926 VILLA LANTE PL BOCA RATON, FL 33434 BOCA RATON, FL 33434 No Chg-P 01082006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 04-3602631 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GREENBERG, JEFFREY L P.A. DO NOT WRITE LAW OFFICE OF JEFFREY L. GREENBERG, P.A. 4800 N. FEDERAL HWY., STE. 304D IN THIS SPACE BOCA RATON, FL 33431 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and into it applicable, (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE MARKE OZDEMIR, CIHAT STREET ADDRESS 19926 VILLA LANTE PL CITY-51-22P BOCA RATON, FL 33434 TITLE SERBETCIOBLU, SIBEL NAME STREET ADDRESS 19926 VILLA LANTE PL CITY-ST-ZIP BOCA RATON, FL 33434 TITLE MAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE 35AR87 STREET ADDRESS CITY-ST-ZIP TOTE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED

12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oals, that I am an officer or director of the corporation or the receiver of itsustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND PRINTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTION Date

CITY-ST-ZIP