

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 17, 2006 8:00 am**  
**Secretary of State**

02-17-2006 90083 013 \*\*\*150.00

DOCUMENT # P04000028103

1. Entity Name

ORBI-TECH, INC.



Principal Place of Business

6246 12TH AVE.  
NEW PORT RICHEY FL 34653

Mailing Address

6246 12TH AVE.  
NEW PORT RICHEY FL 34653



2. Principal Place of Business

3. Mailing Address

2655 SHIPSTON AV.

2655 SHIPSTON AV

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/05)

City & State

City & State

NEW PORT RICHEY, FL NEW PORT RICHEY, FL

4. FEI Number

AP-PLIED FOR

Applied For

Not Applicable

Zip

Country

Zip

Country

34655

USA

34655

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GANUZA, MARGIE I  
6246 12TH AVE  
NEW PORT RICHEY FL 34653

Name MARGIE I. GANUZA

Street Address (P.O. Box Number is Not Acceptable)  
2655 SHIPSTON AV.

City NEW PORT RICHEY FL Zip Code 34655

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

*Margie I. Ganuza*

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

NOTE: Registered Agent signature required when reinstating)

DATE

2/2/2006

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME GANUZA, MARGIE I  
STREET ADDRESS 6246 12TH AVE  
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE PD ☒ Change ☐ Addition  
NAME MARGIE I. GANUZA  
STREET ADDRESS 2655 SHIPSTON AV.  
CITY-ST-ZIP NEW PORT RICHEY, FL 34655

TITLE DV ☐ Delete  
NAME CHAN, SYLVIA H  
STREET ADDRESS 6246 12TH AVE.  
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE ☒ Change ☐ Addition  
NAME SYLVIA H. CHAN  
STREET ADDRESS 2655 SHIPSTON AV.  
CITY-ST-ZIP NEW PORT RICHEY, FL 34655

TITLE DST ☐ Delete  
NAME POTTER, JUDSON JR  
STREET ADDRESS 6246 12TH AVE,  
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE ☒ Change ☐ Addition  
NAME JUDSON F. POTTER, JR.  
STREET ADDRESS 2655 SHIPSTON AV.  
CITY-ST-ZIP NEW PORT RICHEY, FL 34655

TITLE D ☐ Delete  
NAME GANUZA, CARLOS L  
STREET ADDRESS 15 CARLETON AVE  
CITY-ST-ZIP DALY CITY CA 94015

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME POTTER, MATTHEW A  
STREET ADDRESS 5940 MAIN STREET  
CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME GANUZA, CARLOS  
STREET ADDRESS 6246 12TH AVE  
CITY-ST-ZIP NEW PORT RICHEY FL 34653

TITLE ☒ Change ☐ Addition  
NAME CARLOS GANUZA  
STREET ADDRESS 2655 SHIPSTON AV  
CITY-ST-ZIP NEW PORT RICHEY, FL 34655

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Margie I. Ganuza* MARGIE I. GANUZA 2/2/2006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

429-934-0868