

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000058054

FILED
Jul 09, 2006
Secretary of State

Entity Name: ITEC, INC.

Current Principal Place of Business:

8787 SOUTHSIDE BLVD #512
JACKSONVILLE, FL 32256

New Principal Place of Business:

509 MENORCA PLACE
SAINT AUGUSTINE, FL 32092

Current Mailing Address:

8787 SOUTHSIDE BLVD #512
JACKSONVILLE, FL 32256

New Mailing Address:

509 MENORCA PLACE
SAINT AUGUSTINE, FL 32092

FEI Number: 20-1080783

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHEKKILLA, SARITHA
8787 SOUTHSIDE BLVD #512
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

CHEKKILLA, SARITHA
509 MENORCA PLACE
SAINT AUGUSTINE, FL 32092 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: _____

Electronic Signature of Registered Agent

07/09/2006

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CHEKKILLA, KIRTHIDHAR G
Address: 8787 SOUTHSIDE BLVD #512
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CHEKKILLA, KIRTHIDHAR G
Address: 509 MENORCA PLACE
City-St-Zip: SAINT AUGUSTINE, FL 32092

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: KIRTHIDHAR GOUD CHEKKILLA

DP

07/09/2006

Electronic Signature of Signing Officer or Director

Date