

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000136185

**FILED**  
**Mar 12, 2006**  
**Secretary of State**

**Entity Name:** OPTIMTECH INCORPORATED

**Current Principal Place of Business:**

1760K LINTON LAKES DRIVE  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

525 NORTH OCEAN BOULEVARD  
1920  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

1760K LINTON LAKES DRIVE  
DELRAY BEACH, FL 33445

**New Mailing Address:**

525 NORTH OCEAN BOULEVARD  
1920  
POMPANO BEACH, FL 33062

**FEI Number:** 20-1689611

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHKLIAR, VITALI MR.  
1760K LINTON LAKES DRIVE  
DELRAY BEACH, FL 33445 US

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

CHKLIAR, VITALI MR.  
525 NORTH OCEAN BOULEVARD  
1920  
POMPANO BEACH, FL 33062 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: VITALI CHKLIAR

03/12/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: CHKLIAR, VITALI  
Address: 1760K LINTON LAKES DRIVE  
City-St-Zip: DELRAY BEACH, FL 33445

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

Title: PSTD (X) Change ( ) Addition  
Name: CHKLIAR, VITALI  
Address: 525 NORTH OCEAN BOULEVARD  
City-St-Zip: POMPANO BEACH, FL 33062

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: VITALI CHKLIAR

MR

03/12/2006

Electronic Signature of Signing Officer or Director

Date