

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Aug 02, 2006  
Secretary of State**

DOCUMENT# P05000153468

Entity Name: ALTTEC CORPORATION

**Current Principal Place of Business:**

707 NORTH FRANKLIN STREET  
SUITE 750  
TAMPA, FL 33602

**New Principal Place of Business:**

4250 114 TERRACE NORTH  
CLEARWATER, FL 33762

**Current Mailing Address:**

707 NORTH FRANKLIN STREET  
SUITE 750  
TAMPA, FL 33602

**New Mailing Address:**

4250 114 TERRACE NORTH  
CLEARWATER, FL 33762

FEI Number: 56-2599186

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WATKINS, ALLAN C  
707 NORTH FRANKLIN STREET  
SUITE 750  
TAMPA, FL 33602 US

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

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WATKINS, ALLAN C  
Address: 707 NORTH FRANKLIN STREET, SUITE 750  
City-St-Zip: TAMPA, FL 33602

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

Title: D/P (X) Change ( ) Addition  
Name: CATTEL, J. D  
Address: 4250 114 TERRACE NORTH  
City-St-Zip: CLEARWATER, FL 33762

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: J.D. CATTEL

PRES

08/02/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date