## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

OCUMENT #	P93000007459	(9)
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Principal Place of Business	Mailing Address				
P.O. BOX 10095 COCOA FL 32923 US	Mailing Address  3001 AEROSPACE PKWY  BROOK PARK OH 44142				
2. Principal Place of Business	2a. Mailing Address				
21	26				
Sulte, Apt. #, etc.	Suite, Apt. #, etc.				

**FILED** Apr 15 1998 8:00am Secretary of State

J&H.	<b>FECHNICAL SERVICES, INC</b>	•			į			
							. <b>86</b> (1) <b>88</b> (1) 1 <b>38</b> (1) <b>6(89</b> ( <b>8</b> )	
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Principal Place		Mailing Address						
P.O. BOX 100		3001 AEROSPACE PKWY						
OOCOA FL 32 US	:923	BROOK PARK OH 44142				DO NOT WRITE II	N THIS SPACE	
•					-	3. Date Incorporated or Qualified		
						01/29/1993		
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number	I A	pplied For
21		26				59-3168690	N	ot Applicable
Sulte, Apt.	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$8.75	Additional
22		27				G. Certificate of Status Desired	Fee R	equired
City & State	9	<b>├</b> ¬ ′	City & State			6. Election Campaign Financing		May Be
23		28				Trust Fund Contribution	Added Added	to Fees
Zip	Country	Zip	Coun	itry	1	8. This corporation owes or has paid		
24	25 9. Name and Address of Current	29 Registered Agent	30		L	Personal Property Tax due June 3 10. Name and Address of New Regi		No
NO	WAK, DAVID E	negistered Agent		31 Name		to. Hame and Address of New Regi	stered Agent	
	5 8. WASHINGTON AVE., #103		L					
	USVILLE FL 32780		1	32 Stree	t Address	(P.O. Box Number is Not Acceptable	ı)	
(71)	DOTILLE ! E SE/OS		h	33				
				34 City			FL 85 Zip	Code
11. Pursuant t	o the provisions of Sections 607.0502	and 607.1508, Florida Statut	es. the abo	. L	d corpora	ation submits this statement for the pur		its registered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligations.	of Florida, Such change was a	authorized	by the co	rporation'	ition submits this statement for the pur s board of directors. I hereby accept	the appointment as	registered
-	in annual with, and accept the obligat	10015 OI, 30011011 007.03 <b>0</b> 3, FI	oriua Statu	les.				
SIGNATURE	Signature, typed or printed hame of registered agent	and tile dapplicable (NOI	E: Registered	Agent signatu	re required w	/hen reinstating)	DATE	I,
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE		3S IN 12
TITLE	DP	☐ DELETE	1.1 TITL	E	4 -	/S/D	Change	Addition
NAME	PATTERSON, ALEXANDER G		1.2 NAM	4E	PA'	tterson, Alexander	RG.	1;
STREET ADDRESS	P.O. BOX 10095 NA		1.3 STR	eet address	ρ.c	. BOX 10095 NA		ļi.
CITY-ST-ZIP	COCOA FL 32923		14 CITY	-ST-ZIP	Co	COA, FL 32923		
TITLE		DELETE	21 TITL	E	V.	77/4	☐ Change	Addition C
NAME			2.2 NAM	1E		se ann Kodger		
STREET ADDRESS			2.3 STR	eet address		. Box /0095 NA		
CITY-ST-ZIP		Pereze		Y-ST-ZIP		COA , FL. 32923	——————————————————————————————————————	A 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
TITLE		☐ DELETE	3.1 TITL	=	D		∐ Change	Addition
NAME			3.2 NAV	-	LA	WRENCE L. GOOCH		
STREET ADDRESS				EET ADDRESS	10	. BOX 10095 NA COA, FL 34923		
CITY-ST-ZIP TITLE		DELET <b>E</b>	3.4. CIT	Y-ST-ZIP	CO	cok, FL 32923	☐ Change	Addition
i							☐ cuange	☐ AUGILION
NAME OTREET ADDRESS			4. 2 NAN		Ì			
STREET ADDRESS				E1 ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.1 TITU	-ST-ZIP	<del>                                     </del>		Change	Addition
NAME		La Descrit	5.2 NAM		1		C. cumido	
STREET ADDRESS				ET ADDRESS	1			
CITY-ST-ZIP					1			
TITLE		DELETE	6.1 TITU	-ST-ZIP	<del> </del>		Change	Addition
NAME			6.2 NAM					
STREET ADDRESS				ET AODRESS	Ì			
CITY-ST-ZIP			1	-ST-ZIP				ļ
dal I baselos	Territorius in a cheann and a chean and a chean	N - 60 - 1	V.4 (1)11	or all	1	-6 440 03/0\(0) Floride Ctatutes 14.		information.

nereby ceruly that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 13 if changed, or on an attachment with an address.