May 03, 1999 8:00 am Secretary of State

05-03-1999 90124 006 ***300.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000030878

1. Corporation Name

ISO-TECK INDUSTRIES, INC.

			,					1		. 30 111 53103 1			
Principal Place of Business Mailing Address								1					
1101 NW 31 AVE 1101 NW 31ST AVE													
POMPANO BCH FL 33069 US				POMPANO BEACH FL 33069 US				DO NOT WRITE IN THIS SPACE					
03			00					3.	Date Incorporated or Qualifed		<u> </u>		
								Į -	04/27/1993				
2. Principal Place of Business				2a. Mailing Address				4.	FEI Number		$\neg \top$	Api	plied For
21				26					65-0408367		Not Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.				1_			\$8	.75 A	dditional
22]				5.	-Certificate of Status Desired		F	ee Re	quired
City & State				City & State				6. Election Campaign Financing \$5.00 May Be					
23				8				Trust Fund Contribution		A	dded to	o Fees	
Zip Country				Zip Country				8. This corporation owes the current year Intangible					_
24	25		29	30					Personal Property Tax.		Ye	s	□No
	9. Name	and Address of Cu	irrent Regis	tered Agent		1	r	10.	Name and Address of New Ro	gistered /	Agent		
CII IN	100 110				'	81	Name						
FILINGS, INC.							Street Addre	ress (P.O. Box Number is Not Acceptable)					
3732 NW 16TH ST FT LAUDERDALE FL 33311													
FIL	AUDERDALI	E FE 33311			{	33							
					-	34	City				85	Zip C	code
							·			FL			
l office or n	egistered age	ent, or both, in the S	tate of Florid	07.1508, Florida Statute da. Such change was au , Section 607.0505, Flor	uthorized I	by 1	the corporation	ration 's bo	n submits this statement for the poard of directors. I hereby accept	urpose of o the appoin	changi itment	ng its as rec	registered jistered
SIGNATURE		,	-										
SIGNATURE	Signature, typed	or printed name of registere			Registered A	gent	t signature required	when r	reinstating)	DATE			
12.		OFFICER	S AND DIRE		13.				ADDITIONS/CHANGES TO OFF	ICERS AN			
TITLE	D			☐ DELETE	1.1 TITL	E	ŀ				□ Ch	ange	Addition
NAME BIRO, BETTY				1.2 NA			AME						
STREET ADDRESS 1101 NW 31 AVE				. 1.3 S ³			1.3 STREET ADDRESS						
CITY-ST-ZIP	POMPANO	BCH FL			14 CITY	/- ST	T-ZIP						
TITLE	0			☐ DELETE 2.1			2.1 TITLE				□ Ch	ange	Addition
NAME	BIRO, IRENE			2.2 N			2.2 NAME						
STREET ADDRESS1101 NW_31 AVE				2.3 \$7			2.3 STREET ADDRESS						-
CITY-ST-ZIP	POMPANO BCH FL						2.4 CITY-ST-ZIP						
TITLE	D			☐ DELETE	3.1 TITL	E					☐ Ch	iange	☐ Addition
NAME	SWINSCO, DAVID			321									
STREET ADDRESS 1101 NW 31 AVE				3.3 STR			ADDRESS						
CITY-ST-ZIP	Y-ST-ZIP POMPANO BCH FL						3.4. CITY-ST-ZIP						
TITLE				☐ DELETE 4.1		4.1 TITLE					☐ Ch	ıange	Addition
NAME	.**			4. 7		4. 2 NAME							
STREET ADDRESS	TREET ADDRESS			4.3 \$.3 STREET ADDRESS							
CITY-ST-ZIP					CITY-ST-ZIP								
TITLE	ITILE			☐ DELETE 5.1 T		Æ					□ Ct	lange	☐ Addition
NAME				5.2 NAME									
STREET ADDRESS					5.3 STR	EET	ADDRESS						
CITY-ST-ZIP	L				5.4 CITY	_	r-zip						
TITLE				☐ DELETE	6.1 TITL	Ε					☐ Ch	ange	☐ Addition
NAME					6.2 NAM	ŀΕ							
STREET ADDRESS					6.3 STR	EET	ADDRESS						

14. I hereby certify 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 12 or Block 13 if chapted, or on an attachment with all address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP