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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000049957 (2)

PARTECH INDUSTRIES, INC.

	Principal Place of Business	Mailing Address			
	847 N E 79 STREET MIAMI FL 93138 US	P. O. BOX 172267 MIAMI FL 33017-2267 US	·		
			3. Date Incorporated or Qualified 07/09/1993		
Г	2. Principal Place of Business	2a. Mailing Address	4. FEI Number		
2	1	26	65-0430062		
2	Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired		

FILED Jun 05 1997 8:00am Secretary of State



3a. Date of Last Report 01/23/1996

Applied For Not Applicable

Suite, Apt. #, etc.	2	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additi						
City & State		City & State		6. Election Campaign Financing	•	\$5.00	May Ro			
23	21	3				Trust Fund Contribution		Added t		
Zip	Country	Zip	Co	untry		B. This corporation has liability for	inlangible	tax under s.	199.032,	
25 29			30				Yes No			
	Address of Current Reg	lstered Agent		12.1		10. Name and Address of New R	gistered	Agent		
PARACHA, HABIB U 81 Name										
18908 N.W. 77 PLO	CE			82	Street Addr	ess (P.O. Box Number is Not Accepta	ble)			
MIAMI FL 33015										
					83					
				84 City 85 Zip Code						
				L.J.			FL	. []		
 Pursuant to the provisions office or registered agent. 	of Sections 607.0502 and or both, in the State of Flo	l 607.1508, Floric orida. Such chan	ia Statutes, the a ge was authorize	above-r ed by fi	named corp ne corporati	oration submits this statement for the on's board of directors. I hereby acce	purpose o	i changing its wintment as	s registered registered	
 agent. I am lamiliar with, a 	and accept the obligations	of, Section 607.	0505, Florida Sta	tutes.	- in b area	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	P. C. C. Sept.	and the state of	- Og - O - O - O - O - O - O - O - O - O	
SIGNATURE					· · · · · · · · · · · · · · · · · · ·					
Signature, typed or pri	inted name of registered agent and OFFICERS AND DIF		(NOTE: Registers		signature requir	ad when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND	DIRECTOR	C IN 12	
TITLE DP	OTTIOE IN THE BIT	□.DE				ADDITIONAJOHANAZO TO OTT	OLIND AIN	Change	Addition	
NAME PARACHA, H	iabib u			AME.						
STREET ADDRESS 18908 N.W.			TREET AD	IDRESS						
CITY-ST-ZIP MIAMI FL				CITY-ST-	1				Į.i.	
TITLE VP		DE						Change	Addition	
NAME · NORMA L. P.	NORMA L. PARACHA		2.2 M	IAME						
STREET ADDRESS 18908 N W 7	77 PLACE		2.3 \$	STREET AD	DORESS					
CITY-ST-ZIP MAMI FL		2		CITY-ST-	7IP				Ì	
TITLE		DE	LETE 311	ITLE				Change	Addition	
NAME			3.2 h	IAME	-					
STREET ADDRESS			3.3 5	TREET AD	DRESS					
CITY-ST-ZIP				CITY - S1-	7IP					
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NAME			4. 2	NAME	1					
STREET ADDRESS			4.3 5	STREET AD	DRESS					
CITY-ST-ZIP				TY-SI-	ZIP					
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NAME				lame .	İ	1				
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CITY-ST-ZIP				HTY-SI-	ZIP			Change	Ledition	
TITLE		☐ DE			. }			Change	Addition	
NAME OTREET ADDRESS				IAME	NODEOC					
STREET ADDRESS		•		STREET AD	1					
CITY-ST-ZIP 14. I do hereby certify that the	information supplied with	this filing does r		ity-St-i		in Section 119.07(3)(i), Florida Statule	es. I furthe	r 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.