SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
1995 AUG -1 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000070394 (0)**

1. Corporation Name
TECH-TRUCK, INC.

Principal Place of Business	Mailing Address
1751 S.W. 8TH STREET #203 POMPANO BEACH FL 33069 US	1751 S.W. 8TH STREET #203 POMPANO BEACH FL 33069 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/11/1993
3a. Date of Last Report: 06/16/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)

4. FEI Number: 65-0446219 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. (22): 207
Suite, Apt. #, etc. (27): 207

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

City & State (23)
City & State (28)

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip (24) Country (25) Zip (29) Country (30)

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

RODRIGUEZ, CORA
1751 SW 8 ST
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name: Randall L. Sidlosca P.A.
82 Street Address (P.O. Box Number is Not Acceptable): 1101 Brickell Bayshore Ave
83: Suite 902.
84 City: Miami FL 85 Zip Code: 33131.

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 7-24-95.
Signature of (or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PVST	11 TITLE	President	☑ Change ☐ Addition
NAME	NIR, AVI	12 NAME	Nir. Avi	
STREET ADDRESS	1910 NW 39 AVE	13 STREET ADDRESS	1751 SW 8st. (207)	
CITY-ST-ZIP	COCONUT CREEK FL 33066	14 CITY-ST-ZIP	Pompano Beach Fl 33069	
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	NIR, AVI	22 NAME		
STREET ADDRESS	1910 NW 39 AVE	23 STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FL 33066	24 CITY-ST-ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 11 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Avi Nir June 16, 95 305 78/2926
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Daytime Phone #)

029209 CP