

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P93000081453

1. Entity Name
MEGATECH TESTING SERVICES, INC.



Principal Place of Business

**1680 NW 96 AVE
MIAMI, FL**

Mailing Address

**1680 NW 96 AVE
MIAMI, FL**

DO NOT WRITE IN THIS SPACE

02062006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2332736

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ACOSTA, AMADO J
1680 N.W. 96 AVE.
MIAMI, FL 33172**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000416488
02/13/06-80018-010 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ACOSTA, AMADO J
STREET ADDRESS 1680 NW 96 AVE
CITY-ST-ZIP MIAMI, FL

TITLE VD
NAME ACOSTA, MICHAEL B
STREET ADDRESS 1680 NW 96 AVE
CITY-ST-ZIP MIAMI, FL

TITLE VD
NAME ACOSTA, RICHARD A
STREET ADDRESS 1680 NW 96 AVE
CITY-ST-ZIP MIAMI, FL

TITLE SD
NAME CARVAJAL, PEDRO J
STREET ADDRESS 1680 NW 96 AVE
CITY-ST-ZIP MIAMI, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Amado J. Acosta* **AMADO J. ACOSTA** 2/7/06 477-1707 X 211