

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED

1995 AUG -3 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000059538 (6)**

1. Corporation Name
INVENTEK, INC.

Principal Place of Business Mailing Address
**730 BAY ESPLANADE
CLEARWATER, FL 34630**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 08/11/1994	3a. Date of Last Report N/A
4. FEI Number 59-3261966	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
6. This corporation has liability for interjurisdictional tax under S. 189.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 730 BAY ESPLANADE	26 SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27 SAME
City & State	City & State
23 CLEARWATER, FL	28 SAME
Zip	Zip
24 34630	29 SAME
Country	Country
25 USA	30 SAME

9. Name and Address of Current Registered Agent

**UNITED CORPORATE SERVICES, INC.
801 N.E. 167TH STREET
SUITE 300
NORTH MIAMI BEACH FL 33162**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 _____ (NOTE: Registered Agent signature required when registering) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	FURNISS, J. STEVEN
STREET ADDRESS	115 MAIN STREET
CITY - ST - ZIP	LINCOLN NH 03251
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PRESIDENT & TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	J. STEVEN FURNISS	
13 STREET ADDRESS	730 BAY ESPLANADE	
14 CITY - ST - ZIP	CLEARWATER BEACH, FL 34630	
21 TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	JAMES E. FURNISS	
23 STREET ADDRESS	650 ISLAND WAY #506	
24 CITY - ST - ZIP	CLEARWATER, FL 34630	
31 TITLE	SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	ELIZABETH G. FURNISS	
33 STREET ADDRESS	650 ISLAND WAY #506	
34 CITY - ST - ZIP	CLEARWATER, FL 34630	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

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 110.07(3)(b), 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 changed, or on an attachment with an address.

SIGNATURE: J. Steven Furniss, President **9/10/95** **813 447-4382**
SIGNATURE AND TYPED OFF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
J. STEVEN FURNISS, PRESIDENT