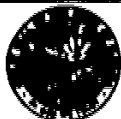


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P 94 0000 71755

1. Corporation Name

**H.K. TECH INTERNATIONAL
CORP.**

Principal Place of Business

Mailing Address

**612 S. U.S.1
FT. PIERCE, FL. 34950**

**APPROVED
AND
FILED**

95 JUN 23 AM 10:05

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **SEPT. 29, 1994** 3a. Date of Last Report **NONE**

4. FBI Number **1** ☒ Applied For ☐ Not Applicable

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

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

6. This corporation has liability for intangible tax under S. 199.052, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 5770 W. ORLBRONSON 26 5770 W. ORLBRONSON

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 319

27 # 319

City & State

City & State

23 KISSIMMEE FL.

28 KISSIMMEE FL.

24

34746

Country

25 OSGALA

29

34746

Country

30 OSGALA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HASMUKH D. PATEL
2462 SOUTH GOWINDR
PSL, FL. 34952**

**81 Name VIRBALA. PATEL
82 Street Address (P.O. Box Number is Not Acceptable) 3531 BONAIRE Blvd.
83 #1413
84 City KISSIMMEE FL 85 Zip Code 34741**

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

(VIRBALA PATEL) (407) 352-5465

6/13/95

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

NOTE: Registered Agent signature required when resigning

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	P
NAME	HASMUKH. PATEL	12 NAME	VIRBALA PATEL
STREET ADDRESS	2462 South Gowin Dr.	13 STREET ADDRESS	3531 BONAIRE Blvd. #1413
CITY - ST - ZIP	P.S.L. FL. 34952	14 CITY - ST - ZIP	KISSIMMEE FL 34741
TITLE	UP	21 TITLE	NP
NAME	KIRIT VARIA	22 NAME	HASMUKH PATEL
STREET ADDRESS	128 CLAREMONT Dr.	23 STREET ADDRESS	2462 South Gowin Dr.
CITY - ST - ZIP	LANDSALE, PA 19446	24 CITY - ST - ZIP	P.S.L. FL 34952
TITLE		31 TITLE	S
NAME		32 NAME	VIRBALA PATGL
STREET ADDRESS		33 STREET ADDRESS	3531 BONAIRE Blvd. #1413
CITY - ST - ZIP		34 CITY - ST - ZIP	KISSIMMEE FL 34741
TITLE		41 TITLE	T
NAME		42 NAME	HASMUKH PATEL
STREET ADDRESS		43 STREET ADDRESS	2462 South Gowin Dr.
CITY - ST - ZIP		44 CITY - ST - ZIP	P.S.L. FL. 34952
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

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***233.75 ***233.75**

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)(k), 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: (VIRBALA PATEL) 6/13/95 (407) 352-5642

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

\$225.00 + 8.75 = \$233.75