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CORPORATION
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000094038 (4)

1. Corporation Name

ALVAREZ TECHNOLOGIES, INC.

Principal Place of Business

Mailing Address

7970 SIOUX LANE
LAKELAND FL 33809

P O BOX 2664
LAKELAND FL 33806

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

12/29/1994

4. FEI Number

Applied For

FIN # 65-0548539

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

7. The corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes ☐ No ☒

2. Principal Place of Business

2a. Mailing Address

21 7970 SIOUX LANE

26 P.O. Box 2664

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 LAKELAND FL

28 LAKELAND FL

Zip

Country

Zip

Country

24 33809

25 FL

29 33806

30 FL

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALVAREZ, BRENDA C
7970 SIOUX LANE
LAKELAND FL 33809

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Brenda C. Alvarez

Brenda C. Alvarez

4/29/95

(Signature typed or printed name of registered agent and the 4 appointing)

(NOTE: Registered Agent signature required when registering)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

NAME

ALVAREZ, BRENDA C

STREET ADDRESS

P O BOX 2664

CITY - ST - ZIP

LAKELAND FL 33806

Brenda C. Alvarez
7970 SIOUX LANE
(GALVA) LAKELAND
FL 33809

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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

SIGNATURE:

Brenda C. Alvarez

Brenda C. Alvarez

4/28/95 813/8658312

(Signature typed or printed name of signing officer or director)

Title

Exemption (If any)