Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90101 028 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000038897

1. Corporation Name

ITECH C	ONSULT	ING, INC.						
Principal Place	e of Busines		Ma	ailing Address		_		4 (MB)(MB) (10 (B)(A) (1)(1) 48(A) (B(A)) (B)(A) (B)(A) (B)(A) (B)(A) (B)(A) (B)(A) (B)(A) (B)(A) (B)(A) (B)(A
1865 BRICKELL AVE. 1865 BRICKELL AVE.								
A-2112 A-2112								
MIAMI FL 33129	MI FL 33129	L 33129			DO NOT WRITE IN THIS SPACE			
US U				J\$				3. Date Incorporated or Qualifed
								05/15/1995
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For
21				26				65-0584452 Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired  Fee Required
22				City & State				6. Election Campaign Financing S5.00 May Be
City & State								6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23 Country			28	Zip Countr				8. This corporation owes the current year Intangible
Zip		Country		<b>←</b> יץ	30	у		Personal Property Tax.
24	0 N	and Address of Curr	29	tarad Agent	130			10. Name and Address of New Registered Agent
	9, Name	and Address of Cur	aur Kedis	reisa wäsur		81	Name	
PI AN	NCO, CAR	Δ 201				•		·
	BRICKEL					82	Street A	t Address (P.O. Box Number is Not Acceptable)
		L AVE.						
A-2112						83	ĺ	
MIAMI FL 33129						84	City	85 Zip Code
							-	d corporation submits this statement for the purpose of changing its registered
agent. I a	m familiar w	ith, and accept the obl	gations of,	if applicable. (NOTE	: Registered	nes.	•	poration's board of directors. I hereby accept the appointment as registered  a required when reinstating)  DATE
12.		OFFICERS	AND DIRE		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D			☐ DELETE	1.1 ΤΠ	LE		Change Addition
NAME	BLANCO	, CARLOS A			1.2 NA	ME		
STREET ADDRESS	1865 BR	ICKELL AVE A-2112			1.3 ST	REET	TADORESS	s ·
CITY-ST-ZIP	MIAM) F				1.4 CF	TY-S	T-ZIP	
TITLE		☐ DELETE 2.5		2.1 111	îLE		☐ Change ☐ Addition	
NAME	[				2.2 NA	ME		
STREET ADDRESS		•		•	2.3 ST	REET	T ADDRESS	s
CITY-ST-ZIP	· ·			•	2.4 CI	<u>ITY</u> -9	ST-ZIP	<u> </u>
TITLE				☐ DELETE		3.1 TITLE		Change Addition
NAME					3.2 NA	ME		
STREET ADDRESS					3.3 ST	REE1	T ADORESS	s
CITY-ST-ZIP	ļ				3.4. C	TY-S	T-ZIP	
TITLE				☐ DELETE		4.1 TITLE		Change Addition
NAME					4. 2 N			
STREET ADDRESS							TADDRESS	s
					4.4 CITY			
CITY-ST-ZIP	DI-ZIY			DELETE .			- ===	Change Addition
					5.2 NA			
NAME	]						TADDRESS	s
STREET ADORESS				•	5.4 CF			
CITY-ST-ZIP	ļ .			☐ DELETE	6.1 TIT			Change Addition
TITLE •	· ;			C) DETE IE	1		l	
NAME	I	•			6.2 NA	WIC		

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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 poetwer 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CAPLOS A BLANCO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-854-7018