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

CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000043917 (0)

BTB TECHNICAL SERVICES. INC.

FILED Apr 21 1998 8:00am Secretary of State

							
Principal Plac	e of Business	Mailing Address					
2900 GERALDA CIRCLE WEST PO BOX 14132							
#204 NORTH PALM BEACH FL 33408 PALM BCH GRONS FL 33410					DO NOT WRITE IN THIS SPACE		
US	NUMO 15 WITH				3. Date Incorporated or Qualified		
1					06/07/1995		
	Place of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
21 3111 GARDENS BAST DR. 26					65-0585611	Not	Applicable
Suite, Apt. #, etc. 27					5. Certificate of Status Desired	\$8.75 Ac	
City & Ctol	0	City & Ctoto			6, Election Campaign Financing	\$5.00 N	Mav Be
23 PALM	BEACH GARDENS, FL	28			Trust Fund Contribution	Added to	
Zip 2 2 4	Country	Z⊧p	Country		8. This corporation owes or has paid		
24 334		29	30		Personal Property Tax due June 3		No
ļ	9. Name and Address of Current	Registered Agent		A1	10. Name and Address of New Reg	sterød Agent	
	ACKER, P		81	Name	THACKER P.		
	00 GERALDA CIRCLE WEST		82	Street Add	ress (P.O. Box Number is Not Acceptable))	
#2			63	3111	GARDENS CAST DI	2114	
PALM BCH GRDNS FL 33410					77 31		
			84	City 🙇 _	A CONTRACTOR	85 Zip C	ode
				PA	LM BENCH GARDENS	FL 👸 📆 🛎	410
11, Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Stat If Florida. Such change wa	lutes, the above s authorized by	-named cor the corpora	poration submits this statement for the pu ation's board of directors. I hereby accept	rpose of changing its the appointment as re	registered egistered
agont I a	rn familiar with, and accept the obligat				ation's board of directors. I hereby accept	and donat	•
SIGNATURE	Stgrature, typod or printed name of requiremit agent	and title it applicable (N	OTE Registered Agen	t signature requ	IDENT AGENTS	4/12/98	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE		
FITLE	PVTS	☐ DELETE	1.1 TITLE			Change	Addition
NAME	THACKER, R		1.2 NAME	İ_			,
STREET ADDRESS	2900 GERALDA CIRCLE WEST	#204	1.3 STREET /		III GARDENS EAST Z	WALLE MOI	
CITY-S1-ZIP	PALM BCH GRONS FL	T DELETE	14 CITY-ST	- ZIP			
TITLE		☐ DELETE	2 1 TITLE	1		L. Change	Addition
NAME			22 NAME				
STREET ADDRESS			2 3 STREET A	i			
CITY-ST-ZIP		T BELETE	2 4 CITY-SI	1 - ZIP		- Observe	Applean
TITLE	DELETE		3.1 TITLE			Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET A	l l			
CHTY-ST-ZIP		T or rec	3.4. CITY-ST	· ZIP		Charac	Addition -
TITLE		☐ DELETE	4.1 THILE			☐ Change	Addition
NAME			4. 2 NAME	-			
STREET ADDRESS			4.3 STREET A				
CITY-ST-ZIP		TT BELFY	4.4 CITY-ST	- ZIP			There.
TITLE		DELETE	5 1 TITLE			☐ Change	Addition
NAME			52 NAME				
STREET ADDRESS			5.3 STREET A	3			
CITY-ST-ZIP		——————————————————————————————————————	5.4 CITY - ST	- ŽIP			1 4.200
TITLE		DELETE	6.1 TITLE	ŀ		Change	□ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET A	1			
CITY-ST-ZIP			64 CITY-ST	- 71P			1

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 arrival 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 receivor 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:

Theofen, P. THACKER, PRESIDENT 4/12/94 (SE) 776-7777