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

P95000044962 DOCUMENT

1. Corporation Name

AZTECH MECHANICAL CORPORATION

AZTECH I	MECHANICAL CORPORATI	ON			
Principal Place	of Business	Mailing Address			, 1,000
115 2ND STREET		115 2ND STREET			
RONITA SPRINGS FL 34134 BONITA SPRINGS FL 34134					DO NOT WRITE IN THIS SPACE
US US					3. Date incorporated or Qualifed
					06/02/1995
					4. FEI Number Applied For
2. Principal Place of Business 2a. Mailing Address					65-0582960 Not Applicable
26 Suite Act # etc					_ \$8.75 Additional
Suite, Apt. #, etc.					5. Certificate of Status Desired Fee Required
27					6. Election Campaign Financing \$5.00 May Be
City & State City & State					Trust Fund Contribution Added to Fees
23		28	Country		This corporation owes the current year Intangible
Zip	Country	Zip	Country		Personal Property Tax.
24	25	29 30	<u> </u>		10. Name and Address of New Registered Agent
	9. Name and Address of Curre	nt Registered Agent	81	Name	ig. Name and Assessed
			0.		
MAR	rin, douglas k		82	Street Addr	ress (P.O. Box Number is Not Acceptable)
115 2ND STREET			<u> </u>		
BON	TA SPRINGS FL 34135		83		
			84	City	85 Zip Code
			· ·	1 '	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered
	Slowature, typed or printed name of registered as	30	gistered Age		ed when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHARGES 18 ST. Change Addition
TITLE	D	☐ DELETE	1.1 TITLE		
NAME	MARTIN, DOUGLAS K		1.2 NAME		
STREET ADDRESS	RESS 115 2ND STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	BONITA SPRINGS FL 34134		1.4 CITY-	ST-ZIP	☐ Change ☐ Additio
TITLE	D	☐ DELETE	2.1 TITLE		
NAME	MARTIN, JUDITH M		2.2 NAME		
STREET ADDRESS	AAR AND OTDEET		2.3 STREE	ET ADDRESS	
CITY-ST-ZIP	BONITA SPRINGS FL 34134		2.4 CITY		☐ Change ☐ Addition
TITLE		☐ DELETE	3.1 TITLE		
NAME			3.2 NAME	1	
STREET ADDRESS			3.3 STRE	ET ADDRESS	
1			3.4. CITY	-ST-ZIP	☐ Change ☐ Addition
CITY-ST-ZIP		☐ DELETE	4.1 TITLE		
			4. 2 NAM	E	
NAME			4.3 STRE	ET ADDRESS	
STREET ADDRESS	1		4.4 CITY	-ST-ZiP	DOWN DANK
CITY-ST-ZIP		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
TITLE	-		5.2 NAMI	E	
NAME		•	5.3 STRE	ET ADDRESS	
STREET ADDRESS	S +	•	5.4 CITY	-ST-ZIP	
CITY-ST-ZIP	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	☐ DELETE	6.1 TITLE	Ē	☐ Change ☐ Additi
TITLE	1			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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

FILED

Jan 22, 1999 8:00am

Secretary of State

01-22-1999 90010 011 ***150.00