

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

**APPROVED
AND
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1998 MAR 10 PM 12: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # **P95000060039**

1. Corporation Name
TECNO EPRO CORP
6555 NW 36 ST # 116 B.
MIAMI FL 33166

2. Principal Place of Business
6555 NW 36 ST # 116 B
MIAMI FL 33166

2a. Mailing Address
6555 NW 36 ST # 116 B
MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified
8/3/95

21. State, Apt. # etc.
22. City & State
23. Zip
24. Country

26. State, Apt. #, etc.
27. City & State
28. Zip
29. Country

4. FEI Number
65-0598727

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

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

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
Pedro E. MATA
8201 NW 8 ST # 404
MIAMI FL 33126

10. Name and Address of New Registered Agent

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP

DELETE **P. Antonio Mendoza**
1745 SW 87 PL.
MIAMI FL 33126

DELETE **S. Pedro E MATA**
1745 SW 87 PL.
MIAMI FL 33126

DELETE **T. Fermín Aguilera**
1745 SW 87 PL.
MIAMI FL 33126

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

Change Addition
40000245494
-03/11/98--01117--002
******150.00 ****150.00**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

Change Addition

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 contained in this Annual Report and 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, director, or trustee of the corporation or the officer 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: **Antonio Mendoza - President** Date **3/6/98** 305-891-0067

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)