

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000067097 (2)

TECH-CAL SERVICES, INC.

96 SEP 27 AM 11:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

8700 SOUTHWEST 57TH STREET
COOPER CITY FL 33328

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COOPER CITY FL 33328

3. Date Incorporated or Qualified

3a. Date of Last Report

08/30/1995

4. FEI Number

65 0604143

Applied For
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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

81 Name

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

83

84 City

FL

85 Zip Code

I, the undersigned, being a resident of this State, do hereby certify that the above-named corporation submits this statement for the purpose of changing its registered agent, and that the change is authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and I am, with, and under, the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

(NOTE: Registered Agent's signature required when registering)

DATE

9-25-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY - ST - ZIP

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY - ST - ZIP

9.1 TITLE

9.2 NAME

9.3 STREET ADDRESS

9.4 CITY - ST - ZIP

10.1 TITLE

10.2 NAME

10.3 STREET ADDRESS

10.4 CITY - ST - ZIP

1.1 TITLE

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8.1 TITLE

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8.3 STREET ADDRESS

8.4 CITY - ST - ZIP

9.1 TITLE

9.2 NAME

9.3 STREET ADDRESS

9.4 CITY - ST - ZIP

10.1 TITLE

10.2 NAME

10.3 STREET ADDRESS

10.4 CITY - ST - ZIP

700001975017--6
-10/15/96--01133--021
****225.00 ****225.00

A. Alaw
9-27-96

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/25/96 9544340435

CR2E034 (3/96)