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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000013140 (4)

TECH XXI CORP.

FILED Feb 17 1997 8:00am Secretary of State



Findipal Flade of business Mailing Address			ļ			
7:355 NW 54TH MIAMI FL 33160		7355 NW 54TH ST Miami FL 33168-4831				
				3. Date Incorporated or Qualified 02/08/1996	3a. Date of Last Report	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FFI Number	Applied For	
21 73	77 NW 54St	26 7377 nw 5	457	650652041	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75 Additional		
22 27				G. Certificate of Status Desired	Fee Required	
City & State	ami Fl	City & State Mauu	Fl	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 33	3/66 25 Pade	Zip 33/66	Country Dade		Yes No	
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Re	gistered Agent	
* GON	NZALEZ, YOLANDA M		81 Name			
7355 NW 54TH ST , MIAMI FL 33168			82 Street 737	7377 NW 54 St.		
			84 City	Lami, Fl	FL 85 Zip Code 33166	
11. Pursuant t	to the provisions of Sections 607.0	502 and 607.1508. Florida Statute	s the above-named	corporation submits this statement for the I	purpose of changing its registered.	
office or re	egistered agent, or both, in the Sta	te of Florida. Such change was at	athorized by the core	poration's board of directors. I hereby acce	pt the appointment as registered	
agent. I ar	m familiar with, and accept the obl	igations of, Section 607.0505, Flor	ida Statutes.			
SIGNATURE .	Signature, typed or printed name of registered a	agent and title diapplicable (NOTE:	Registered Agent signature	required when reinstating)	DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	D/Secretary	KChange Addition	
N.VME	GONZALEZ, YOLANDA M		1.2 NAME	· •		
S'REET ADDRESS	7355 NW 54TH ST		1.3 STREET ADDRESS	SAME		
C)TY-ST-ZIP	MIAMI FL 33166		1.4 CITY - ST - ZIP			
TITLE	D	DELETE	2.1 TITLE	D/PRESIDENT	X b Change	
NAME	MINOSO, JORGE A		2.2 NAME	- •		
STREET ADDRESS	7355 NW 54TH ST		2.3 STREET ADDRESS	SAML		
C TY-ST-ZIP	MIAMI FL 33166		2 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3 2 NAME .			
STREET ADDRESS			3.3 STREET ADDRESS			
C TY-ST-ZIP			3 4, CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME -			4. 2 NAME			
S''REET ADDRESS			4.3 STREET ADDRESS			
C TY-SI-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME		11 1	
STREET ADDRESS			5.3 STREET ADDRESS	1	751 7 11 7 11 7 11 7 11 7 11 7 11 7 11	
DINEET HODRIESS			3.3 STREET ADDRESS	i a constant a constan	() (1)	
C TY-ST-ZIP			5.4 CITY-ST-ZIP		11411	
		DELETE		00000205		
C TY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP	0000020\$ -02/18/97010	1/4\\ BOSSIDange Addition 22045	
C TY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-2IP 6.1 TITLE	0000020\$ -02/18/97010 ***165.00	POSSIChange Addition 22045	

region or the receiver or tustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name procedure or tustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name procedure or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name information indicated I am an officer or di appears in Block 12