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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS -

DOCUMENT # P9600063709

FILED Feb 05, 1999 8:00am Secretary of State

02-05-1999 90001 001 ***150.00

1. Corporation		1900000	10010 0					
GARTECH	I, INC.						IN NAKO 21131 (SALI BATE)	
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Principal Place	of Business	A1.90	Mailing Address			# 18891001 (III 18118 Bitti 0011 0011 0011 0011	16. 8 11 8.8 14 114 1 1 9 844 8 9 44	i idar isat
MATE COUNTRY WALK DRIVE 3475 COUNTRY WALK DRIVE						.A.*		
PORT ORANGE FL 32119 PORT ORANGE FL 32119			19		DO NOT WRITE IN THIS SPACE			
	,					3. Date Incorporated or Qualifed		
						07/29/1996	· · · · · · · · · · · · · · · · · · ·	
6 Deinginal Pl	ace of Business	F 141	2a. Mailing Address			4. FEI Number	 -	ed For
21		(A)	26			59-3395694	\$8.75 Add	pplicable
Suite, Apt.	#, etc.	146 () . 	Suite, Apt. #, etc.			5. Certifcate of Status Desired	Fee Requ	
22			City & State			6. Election Campaign Financing	\$5.00 M	
City & State	e .		28			Trust Fund Contribution	Added to	Fees
23 Zip	Co	ountry 🔆	Zip	Cou	intry	8. This corporation owes the current year	Intangible]No
24	25	7.3	29	30		Personal Property Tax 10. Name and Address of New Register		
	9. Name and A	ddress of Curren	t Registered Agent		81 Name	10. Name and Address of the tree		-
, ,	OCOVD A:		Frank at 1		 	The Mark Assertable		
GARI CARAZE	ces, r.a. Country Wal	K DDN/F			82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
	T ORANGE FL 3				83			
\$			•		84 City		85 Zip Co	de
in a	·				1 1 7	propartion submits this statement for the purposition's board of directors. I hereby accept the appropriate the statement for the purposition of the statement for the statement f	- L	-istorod
SIGNATURE	Signature, typed or prints	od name of registered age	nt and title if applicable.	(NOTE: Registered		uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		S IN 12
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NAME	GARCES, RAF	AEL A		1	AME			
STREET ADDRESS					STREET ADDRESS			
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NAME	<u></u>	32 V.	DELE	TE 2.1 T	CITY-ST-ZIP		☐ Change	Addition
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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.

SIGNATURE: SIGNATURE SIGNATURE THE THE THE THE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

//19/99 Date (9 04) 761 -979

R2E034 (11/98)