

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

FILED  
May 19 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000013359 (9)

1. Corporation Name  
AMTECH COMPUTERS, INC.



Principal Place of Business

2292 MAYPORT ROAD, SUITE 11  
JACKSONVILLE FL 32233

Mailing Address

2292 MAYPORT ROAD, SUITE 11  
JACKSONVILLE FL 32233

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/10/1997

4. FEI Number

59-3497721

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30 ☐ Yes ☐ No

2. Principal Place of Business

21 2292 MAYPORT ROAD

Suite, Apt. #, etc.

22 SUITE 6

City & State

23 JACKSONVILLE, FL

Zip

24 32233

Country

25 USA

2a. Mailing Address

26 2292 MAYPORT ROAD

Suite, Apt. #, etc.

27 SUITE 6

City & State

28 JACKSONVILLE, FL

Zip

29 32233

Country

30 USA

9. Name and Address of Current Registered Agent

ROUHANI, PAYMAN  
2292 MAYPORT ROAD, SUITE 11  
JACKSONVILLE FL 32233

10. Name and Address of New Registered Agent

B1 Name

ROUHANI PAYMAN

B2 Street Address (P.O. Box Number is Not Acceptable)

2292 MAYPORT ROAD, Suite 6

B3

B4 City

JACKSONVILLE

FL

B5 Zip Code

32233

11. Pursuant to the provisions of Sections 607.0802 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

PAYMAN ROUHANI / PRESIDENT

4/23/98

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT / DIRECTOR ☐ DELETE

NAME PAYMAN ROUHANI

STREET ADDRESS 2279 Fallen Tree Dr. E.

CITY-ST-ZIP JACKSONVILLE, FL 32246

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT / DIRECTOR ☐ Change ☐ Addition

1.2 NAME PAYMAN ROUHANI

1.3 STREET ADDRESS 2279 FALLEN TREE DR. E.

1.4 CITY-ST-ZIP JACKSONVILLE, FL 32246

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(a), 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.

SIGNATURE:

4/23/98

CR2E034 (10/97)