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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P9700050793 (3)

TEC II. INC.

22

23

24

Źip

City & State

Principal Place of Business Mailing Address 3530 EASTBAY DR 3530 EASTBAY DR **LARGO FL 33771 LARGO FL 33771** 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.

27

28

29

City & State

Zipi

06/06/1997 Applied For Not Applicable \$8.75 Additional X 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible X Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent

50BOLEWSKi

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

FILED

May 19 1998 8:00am

Secretary of State

g. Name and Address of Current Registered Agent ROHRET, KARIN 5290 SEMINOLE BLVD #F ST PETERSBURG FL 33708

25

Country

LARSO 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.

Country

81 Name

82

83 84

30

SIGNATURE (NOTE: Rog stored Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Addition 1 1 TITLE Change TITLE SOBOLENSKI DAVIO NAME 1.2 NAME 1.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 14 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - 7IP TITLE DELETE 4.1 TITLE Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 Till F 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. Thereby 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 suppliemental 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

SIGNATURE:

536-2327