PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000061341

1. Corporation Name

SOURCE 1 TEK, INC.

Principal Place of Business	Mailing Address
7411 MINT JULEP DR. RIVERVIEW FL 33569	7411 MINT JULEP DR. RIVERVIEW FL 33569

FILED Jun 09, 1999 8:00 am Secretary of State

06-09-1999 90032 026 ***150.00



Principal Place of Business Mailing Address				t ifftifft tit iftit iffti sam estit sam enne enen man man men men men.					
7411 MINT JULI		7411 MINT JU							
RIVERVIEW FL 33569		RIVERVIEW FL						00465	
ĺ						DO NOT WRIT	E IN THIS	SPACE	
						3. Date Incorporated or Qualifed			
						07/15/1997 4. FEI Number			Applied For
			Mailing Address			"		Applied For	
21	<u></u>		Suite, Apt. #, etc.			59-3459366 Not App \$8.75 Addition			Not Applicable
— · · · · · · · · · · · · · · · · · · ·			. #, etc.			Le Codiforto of Status Desired			Required
22 27 27 City & State						a Flastica Campaign Financing			
⊢ '	4.	28	.City & State			G. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
23 <u>-</u> Zip	Country	Zip			8. This corporation owes the curre	nt vear Inta		4 10 1 00	
24 Zip	25	29	30			Personal Property Tax.	, 1110	Yes	ŽΝο
	 	f Current Registered Age				10. Name and Address of New R	egistered A	Agent	
	o, riamo alto riadicas o			81	Name				
CAR	DONA, MIGUEL			25		(D.O. Day May Feet half Accessed	hla)		
	MINT JULEP DR.			82	Street Addr	ess (P.O. Box Number is Not Accepta	pie)		
l	RVIEW FL 33569			83					
				84	City		FL	85 Zi	o Code
44 Durauant	to the provinions of Sections	607 0502 and 607 1508 E	orida Statutes th	o shove	-named com	oration submits this statement for the	nurpose of o	changing i	its registered
office or re	egistered agent, or both, in the familiar with, and accept the	ne State of Florida. Such ch	ange was authori	ized by	the corporation	on's board of directors. I hereby accep	t the appoin	tment as	registered
SIGNATURE	*	A PALL IN CONTROL OF THE PARTY	MATE: O.	lacad Arr	elegantus	d when reinstation)	DATE		
42	Signature, typed or printed name of reg	ERS AND DIRECTORS		13.	agnature required	d when reinstating) ADDITIONS/CHANGES TO OFF		D DIRECT	TORS IN 12
12.	D			.1 TITLE		ADDITIONO OF IARIOED TO OF I	.52150 111	Change	
NAME	CARDONA, MIGUEL A			2 NAME					-
STREET ADDRESS	7411 MINT JULEP DR.		I '	.3 STREET	ADDRESS				
	RIVERVIEW FL 33569			.4 CITY-S1	ľ				
CITY-ST-ZIP TITLE	S			1 TITLE	- 211			☐ Change	e Addition
i i	CARDONA, EVELYN	_		2 NAME				_ •	
NAME	7411 MINT JULEP DR		i -	:2 NAME :3 STREET	ADDOESE				
STREET ADDRESS									
CITY-ST-ZIP	RIVERVIEW FL 33569		`	1. 4 CITY-S	1-2112			Chang	e
TITLE									
NAME				I.2 NAME	1000000				
STREET ADDRESS				.3 STREET					
CITY-ST-ZIP				4. CITY-S	1-ZIP			Chang	e Addition
TITLE		L		LI TITLE					
NAME				. 2 NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			T	4 CITY- \$1	- ZIP		<u>-</u>	Chann	Addition
TITLE		L		5.1 TITLE	}			☐ Chang	e
NAME				2 NAME					
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CITY-ST-ZIP				5.4 CITY-ST	-ZIP				
TITLE				3.1 TITLE				Chang	e
NAME			6	2 NAME	İ				
STREET ADDRESS			1 6	3.3 STREET	ADDRESS				
CITY-ST-ZIP			6	A 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(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: