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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000062793 (9)

VORTEC CONSULTING, INC.

FILED Apr 15 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address				
8447 NORTHWEST 51ST PLACE POST OFFIC						
CORAL SPRING	GS FL 33067	LABELLE FL 33935			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					,	
Drive and Div	nae of Business	2a. Mailing Address			07/18/1997 4. FEI Number Applied Fo	
<u> </u>			k%;			_
21 26 Suite, Apt. #, etc.		Suite, Apt. #, etc.			SR 75 Addition	
22		 	27		5. Certificate of Status Desired Fee Required	
City & State		City & State			Election Campaign Financing \$5.00 May Be	
23		 	28		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Count	rv	This corporation owes or has paid the current year Intangible	
24	25	29	30	,	Personal Property Tax due June 30. Property Tax due June 30.	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
LIPA	IDBV IOUN		8	1 Name		
HENDRY, JOHN 30 HARDEE STREET			<u>-</u>			
			82 Street Ac		dress (P.O. Box Number is Not Acceptable)	
LAB	ELLE FL 33935		ă	3		
			Ľ	<u> </u>		
			8	4 City	FL 85 Zip Code	
44 5 5 5 5 5 6	4 6 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	E02 and C07 4E09 Florido Statut	an the abo	un namad aa		tored
office or re	o the provisions of Sections 607.0 egistered agent, or both, in the Sta	ate of Florida. Such change was	es, the abo authorized l	by the corpora	proration submits this statement for the purpose of changing its registration's board of directors. I hereby accept the appointment as register	red
agent. I an	n familiar with, and accept the ob-	ligations of, Section 607.0505, Flo	orida Statut	es.		
SIGNATURE .					buired when reinstalling) DATE	 ;
	Signature, typed or printed name of registered	agent and title if applicable (NOT NDD DIRECTORS		geni agnatura requ	pured when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2
12.		DELETE	13.			odition
TITLE					U viango Lina	20.00.
NAME			1.2 NAME			
STREET ADDRESS				et address		
CITY-ST-ZIP	CORAL SPRINGS FL 33067 D SECT / TABLE DELETE		1.4 CITY-ST-ZIP		Change Ad	ddition
TITLE	-		2 1 TITLE		Citalige C. Au	ווטטווטע
NAME	VOORIES, JANETH		2.2 NAM	i		
STREET ADDRESS	8447 NORTHWEST 51ST P		2.3 STRE	ET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33067		2. 4 CITY-ST-ZIP			ddition.
TITLE	☐ DELETE		3.1 TITLE		Change	ddition
NAME			3.2 NAM	E		
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		3310
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Ad	ddition
NAME			4. 2 NAM	IE		
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP			4.4 CITY	-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Ad	ddition
NAME			5.2 NAM	E		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY	-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Ad	ddition
NAME			6.2 NAM	E		
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY			
14 hereby o	ertify that the information supplied	with this filing does not qualify f	or the exem	ntion stated i	in Section 119.07(3)(i), Florida Statutes. I further certify that the information	ation
indicated of	on this annual report or suppleme director of the corporation or the re	ntal annual report is true and acc eceiver or trustee emnowered to	curate and t execute thi	inat my signat s report as re	iture shall have the same legal effect as if made under oath; that I am equired by Chapter 607, Florida Statutes; and that my name appears in	an N
Block 12 c	or Block 13 if changed, or on an a	tlachment with an address.	1)	/	

11/11/00