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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700062793

1. Corporation VORTEC	C CONSULTING, INC.	002193		, 			
Principal Place of Business Mailing Address						DOTH DOTHE BIND WEN IST	( <b>0 (0)(0)</b> (1)) ( <b>0)</b>
8447 NORTHWEST 51ST PLACE POST OFFICE BOX CORAL SPRINGS FL 33067 LABELLE FL 33935					DO NOT WRITE	IN THIS SPACE	
,					3. Date Incorporated or Qualifed 07/18/1997	•	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	1 × A	pplied For	
21	-	26		65-0825282		lot Applicati	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	1	"Additional Required	
City & Stat	e	City & State		Election Campaign Financing     Trust Fund Contribution	1 1	May Be I to Fees	
Zip.	Country Zip 29 29		Country	/	This corporation owes the current Personal Property Tax.	nrrent year Intangible	
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Re	gistered Agent	
HENDRY, JOHN 30 HARDEE STREET LABELLE FL: 33935			81 82 83	Street Addi	ress (P.O. Box Number is Not Acceptabl	e)	'
		•	84	1		FL	Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was aut	horized by	the corporation	poration submils this statement for the pu on's board of directors. I hereby accept	rpose of changing it the appointment as r	s registered egistered
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re 12. OFFICERS AND DIRECTORS			13.	nt signature require	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT	OPS IN 12
TITLE	DP DELETE		1.1 TITLE		ADDITIONAL TO COLOR	☐ Change	
NAME	VOORIES, RICHARD C		1.2 NAME				
STREET ADDRESS	1		1.3 STREE	TADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33067		1,4 CITY-5				
TITLE	OST DELETE		2.1 TITLE			☐ Change	
NAME	VOORIES, JANETH	ANETH					
STREET ADDRESS	s 8447 NORTHWEST 51ST PLACE		2.3 STREET ADDRESS		· ·		
CITY-ST-ZIP	CORAL SPRINGS FL 33067		2.4 CITY-ST-ZIP				
TITLE		☐ DELETE	☐ DELETE 3.1 TITLE		•	Change	C Addin
NAME			3.2 NAME		·		•
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE	DELETE		4.1 TITLE			Change	
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			•
CITY_ST_7IP			4.4 CITY-S	T-7IP			

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.

5.1 TITLE 5.2 NAME

6.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE: XX

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

with Spores

□ DELETE

☐ DELETE

Six Trees 4=5-91 954-971-9717

Change

Change

☐ Addition

**FILED** 

May 31, 2000 8:00 am Secretary of State

05-31-2000 90018 024 \*\*\*150.00