

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000079357

1. Entity Name
TECH ONE ENGINEERING, INC.



Principal Place of Business

**134 TIMBER LANE
JUPITER, FL 33458**

Mailing Address

**134 TIMBER LANE
JUPITER, FL 33458**



03092004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0796481

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MATTHEWS, JOSEPH
860 US HWY ONE, STE. 210
N. PALM BEACH, FL 33408**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Joseph C Burge
Signature, typed or printed name of registered agent and agent acceptable.

Joseph C Burge
(NOTE: Registered Agent signature required when changing)

3/10/04
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

00000086697
11/12/04-80094-007 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BURGE, JOSEPH C
STREET ADDRESS	1 RABBITS RUN
CITY - ST - ZIP	PALM BEACH GARDENS, FL 33418
TITLE	P
NAME	BURGE, JANE E
STREET ADDRESS	1 RABBITS RUN
CITY - ST - ZIP	WEST PALM BEACH, FL 33418
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

Joseph C Burge
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph C. Burge

3/10/04 *561-748-1329*
Date Daytime Phone