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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P97000086652 (9)

BISHOP'S TECHCEIL, INC.

FILED May 11 1998 8:00am Secretary of State



Principal Pla	ce of Business	Mailing Address	Mailing Address			n tablinger nið tenn hætir ekkir ennir ennir kkirk rænið einið einið endir flytje siðir fædi
1061 WESTCHESTER DRIVE EAST WEST PALM BEACH FL 33417			1061 WESTCHESTER DRIVE EAST WEST PALM BEACH FL 33417			DO NOT WRITE IN THIS SPACE
l						3. Date Incorporated or Qualified
						10/07/1997
2, Principal I	Place of Business	2a. Mailing Address				4. FEI Number Applied For
21		26	26			65-6787422 Not Applicable
Suite, Apt	. W, etc	Suite, Apt. #, etc	Suite, Apt. #, etc.			SR 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & Sta	te	City & State	City & State			6. Election Campaign Financing \$5.00 May Be
23		28	· · · · · · · · · · · · · · · · · · ·			Trust Fund Contribution Added to Fees
Zip	Country	/ Zip	Co	untry	r	8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🔲 Yes 🕡 No
9. Name and Address of Current Registered Agent				1		10. Name and Address of New Registered Agent
PSOINOS, GEORGE D				81	Name	
1655 PALM BEACH LAKES BLVD., STE. 106				82	Street Addr	ress (P.O. Box Number is Not Acceptable)
W	EST PALM BEACH FL	33401		oxdot		
]				83		
1				84	City	Fi 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the				above	e-named corp	poration 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.						
SIGNATURE Signature, typed or printed name of registered agent and title if epiphrable (NOTE Registered Agent signature required when reinstating) DATE						
12.	Of	FICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETI	E 1,1 T	IITLE		☐ Change ☐ Addition
NAME	BISHOP, BARBARA		1.2 N	IAME		
STREET ADDRESS 1061 WESTCHESTER DRIVE EAST			1.3 S	TREET	ADDRESS	
CITY-ST-ZIP	WEST PALM BEAC	H FL 33417	1.4 0	CITY-S	T-ZIP	
TITLE		☐ DELETI	2.17	ITLE		Change Addition
NAME			2.2 N	IAME		
STREET ADDRESS			2.3 \$	TREET	ADDRESS	
CITY-ST-ZIP			2.40	CITY-S	iT-ZIP	
TITLE	TLE		3.1 T	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 N	AME		
STREET ADDRESS			3.3 \$	TREET	ADDRESS	
CITY-ST-ZIP				CITY-S	T-ZIP	
TITLE				ITLE		Change Addition
NAME			4.21	MAME		
STREET ADDRESS			4.3 S	TREET	ADDRESS	
CITY-ST-ZIP				ITY-\$1	i - ZIP	
TITLE	DELETE 5.1		ITLE		Change Addition	
NAME			5.2 N	AME	ĺ	
STREET ADDRESS			5.3 \$	TAEET	ADDRESS	
CITY-ST-ZIP				(TY-\$T	- ZIP	
TITLE		☐ DELETE	6.1 71	TLE	7	☐ Change ☐ Addition
NAME			6.2 N	AME		
STREET ADDRESS			63.5	TREET	ADDRESS	,
CITY - ST - ZIP			6.4 C	ITY-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 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 impowered 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 my address.

SIGNATURE