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

PROFIT CORPORATION ANNUAL REPORT.

1998



Sandra Brimortham

Secretary of State DIVISION OF CORPORATIONS

P97000089858 (9) DOCUMENT #

KPS TECHNICAL SERVICES, INC.

FILED Feb 11 1998 8:00am Secretary of State

	-		
Principal Place of Business	Mailing Address		
1020 PEARSON DRIVE	1020 PEARSON DRIVE		
OVIEDO FL 32765	OVIEDO FL 32765		
			DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
2. Principal Place of Business	2a. Mailing Address		10/20/1997 4. FEI Number Applied For
21	26		59-3474057 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		SR 75 Additional
22	27		5. Certificate of Status Desired Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23	28		Trust Fund Contribution Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 25		10	Personal Property Tax due June 30. Yes No
9. Name and Address of Cur	rent Registered Agent	81 Name	10. Name and Address of New Registered Agent
DIAZ, JOSE		81 Name	
1020 PEARSON DRIVE		82 Street	Address (P.O. Box Number is Not Acceptable)
OVIEDO FL 32765		83	
		63	
		84 City	FL 85 Zip Code
44 Pursuant to the provisions of Sections 607.6	602 and 607 1508 Elarida Statutos	the about named	
office or registered agent, or both of the Sta	te of Florida, Such change was au	thorized by the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
	ngarions of, Section 607.0505, Fibri	da Statutes.	1/22/08
SIGNATURE profes of profest carrier of together	igent and little of applicable (NOTE I	Registered Agent signature	required when reinstating) DATE
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE OP	DELETE	1.1 TITLE	Change Addition
NAME DIAZ, JOSE		1.2 NAME	
STREET ADDRESS 1020 PEARSON DRIVE		1.3 STREET ADDRESS	
CITY-ST-ZIP OVIEDO FL 32765		1.4 CITY - ST - ZIP	
TITLE	☐ DELETE	2.1 TITLE	VICE-PRESIDENT Change MAddition
NAME		2.2 NAME	ROSA DIAZ. 1080 PENESON DR.
STREET ADDRESS		2.3 STREET ADDRESS	1080 PERRSON DR.
City-St-ZiP	DELETA	2 4 CITY-ST-ZIP	OVIEDO, FL. 32765
TITLE	∐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3 2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP	DELETE	3.4. CITY - ST - ZIP	Change Addition
I TITLE	Detere	4.1 TITLE	L Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP	DELETE	44 CITY - ST - ZIP 51 TITLE	☐ Change ☐ Addition
NAME	C. Decen	52 NAME	
STREET AODRESS		53 STREET ADDRESS	
CITY-SI-ZIP		54 CITY-ST-ZIP	
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME .	hand water	6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-SI-ZIP		6.4 CITY-ST-ZIP	
14 hereby postily that the information of market	A 41 in \$1 in a 1 in a		and in Continue 110 07/0V/V Florido Ctatutas 15 with a gradite that the information

recovery commencement supplies with this timing coes not quality 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 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

1/23/98 (UNT) 259- 5251