

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 10, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000061134

1. Entity Name
TECHNOCERAM, INC.



Principal Place of Business
**316 E. HILLSBORO BOULEVARD
DEERFIELD BEACH, FL 33441**

Mailing Address
**316 E. HILLSBORO BOULEVARD
DEERFIELD BEACH, FL 33441**



07062006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0856237

| |
|----------------|
| 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.

**MONTANER, CARLOS
316 E. HILLSBORO BOULEVARD
DEERFIELD BEACH, FL 33441**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD MONTANER, CARLOS 316 E. HILLSBORO BOULEVARD DEERFIELD BEACH, FL 33441 |
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07/11/06-80015-008 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 another (ke)empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/30/06

Date

954 4281111

Daytime Phone #