FILED

Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90083 026 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUI	MENT # S00830								
1. Corporation	K TECH, INC.								
PHUENIA	K TEUM, INC.						ni 18186 ileli 8811 8	: 01+ 01P1+ 0(B1+ 01B)+ 0	1 9 14 818 11 4 88 1
Principal Place	n of Bueinaes	Mailing Address				-	10100 1011 1011 1	1811 818 11 8 1811 81811 8	IBIH BIBIH IBBI
Principal Place of Business Mailing Address 7533 JOMEL DRIVE 7533 JOMEL DRIVE									1
SPRINGHILL FL 34607 SPRINGHILL FL 34607						·			
							OT WRITE IN 1	HIS SPACE	 -
						3. Date Incorporated or Q	ualifed		
						09/14/1990 4. FEI Number			-K-d Faa
—	face of Business	2a. Mailing Address				59-3029366			plied For t Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				35-3025300		\$8.75	
22	m, 616.	27				5. Certifcate of Status De	sired 🗌	Fee Re	1
City & State	e	City & State				6. Election Campaign Fina	ancing	\$5.00	May Be
23		28				Trust Fund Contribution	- 11	Added t	
Zip	Country	Zip	Count	ry		8. This corporation owes	the current yea		_
24	25		30			Personal Property Tax.		☐ Yes	□No
	9. Name and Address of Current	Registered Agent		1 Nar	20	10. Name and Address of	New Registe	red Agent	
SOLI	IMAN, FAWZI M.		[*	iva:	16				
7533 JOMEL DRIVE			8	2 Stre	et Addres	ss (P.O. Box Number is Not	Acceptable)		
SPRINGHILL FL 34607			8	3					
				4 City				FL 85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the abo	ve-nam	ed corpor	ration submits this statement	for the numos	e of changing its	registered
office or re	egistered agent, or both, in the State of mediate with, and accept the obligation	of Florida. Such change was auti	thorized b	y the co	rporation	's board of directors. I hereb	y accept the a	ppointment as re	gisterea
SIGNATURE		,							
	Signature, typed or printed name of registered agent			jent signat	ire required v	when reinstating)	DAT		50.41.40
12.	OFFICERS AND		13.			ADDITIONS/CHANGES	TO OFFICER	S AND DIRECTO	Addition
TITLE	DO SOUMANI FAWIZI M	☐ DELETE	1.1 TITLE					☐ Criai ige	, Addition
NAME	SOLIMAN, FAWZI M. 7533 JOMEL DRIVE		1.2 NAME 1.3 STREET A						•
STREET ADDRESS	SPRINGHILL FL 34607				55				
CITY-ST-ZIP TITLE	SO	☐ DELETE	1.4 CITY- 2.1 TITLE		-			Change	Addition
NAME	AALUMATEL		2.2 NAME					_	
STREET ADDRESS	101 F. DDI F			ET ADDRE	ss				
CITY-ST-ZIP	SPRINGHILL FL 34607 2.40								ļ
TITLE			2.4 CH Y	-ST-ZIP	1	-			
		☐ DELETE	3.1 TITLE			-		Change	☐ Addition
NAME		☐ DELETE				<u>-</u>		Change	☐ Addition
NAME STREET ADDRESS		DELETE	3.1 TITLE 3.2 NAME		ess	<u>-</u>	···	Change	☐ Addition
			3.1 TITLE 3.2 NAME	E ET ADDRI	SS	-			
STREET ADDRESS		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STRE	E EET ADDRE '- ST-ZIP	SSS	-		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP			3.1 TITLE 3.2 NAME 3.3 STRE 3.4, CITY 4.1 TITLE 4.2 NAM	E EET ADDRI '-ST-ZIP					
STREET ADDRESS CITY-ST-ZIP TITLE			3.1 TITLE 3.2 NAME 3.3 STRE 3.4. CITY 4.1 TITLE 4.2 NAM 4.3 STRE	E EET ADDRI '- ST-ZIP E IE EET ADDRI					
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STRE 3.4. CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY	EET ADDRE 				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			3.1 TITLE 3.2 NAME 3.3 STRE 3.4, CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE	E EET ADDRE '-ST-ZIP E IE EET ADDRE -ST-ZIP					
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME	EET ADDRE	SSS			☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STRE	EET ADDRE	SSS	-		☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAME 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAME	EET ADDRE	SSS			☐ Change	☐ Addition

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 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 en an attachment with an address, with all office like expowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP