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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S69559

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PROTEK & ASSOCIATES, INC.

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Principal Place of Business Mailing Address 817 N.W. 1ST STREET 817 N.W. 1ST STREET FT. LAUDERDALE FL 33311 FT. LAUDERDALE FL 33311 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/25/1991 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0274852 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 **1rust Fund Contribution** 26 Zip Country Country This corporation owes or has paid the current year Intangible Yes 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name BELGAU, ROBERT J 817 N.W. 1ST STREET 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33311 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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** (NOTE Fingistered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13 DELETE Change __ Addition TITLE 1.1 TITLE BELGAU, ROBERT J. NAME 1.2 NAME 817 N.W. 1ST STREET STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33311 1.4 CHTY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE BELGAU, ROBERT J. BELGAU, JEANNE 817 NW 1St STEEET NAME 2.2 NAME 817 N.W. 1ST STREET STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL 33311 FORT LAUDERDALE, FL 33311 CITY-ST-7H 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE WILKINS, CHARLES 3.2 NAME 817 NW 1ST ST STREET ADDRESS 3.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 34. CITY-\$T-7IP DELETE ☐ Change Additio TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addi. TITLE 5.1 TITLE NAME 5.2 NAME 53 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ■ Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-2IP 6.4 CITY-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 supplemental 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.

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1/21/98

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FILED

Feb 02 1998 8:00am

Secretary of State