

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Norrman
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # S98704

(7)

50 MAY - 1 JUN 27

TEKNIK TRADING, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 915 MIDDLE RIVER DR SUITE 506 FT LAUDERDALE FL 33304		2b. Mailing Address 915 MIDDLE RIVER DR SUITE 506 FT LAUDERDALE FL 33304		3. Date incorporated or Qualified 12/05/1991	3a. Date of Last Report 03/01/1994
21. Principal Officer or Director 21	2b. Mailing Address 26	4. FEI Number 65-0299433		Applied For Not Applicable	
22. State of Incorporation 22	2b. Mailing Address 27	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23. City & State 23	2b. Mailing Address 28	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24. City & State 24	2b. Mailing Address 29	30. City & State 30		6. This corporation has liability for intangible tax under Chapter 202, Florida Statutes. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

**MORATIS, GEORGE R.
915 MIDDLE RIVER DR
SUITE 506
FT LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 602 (b)(1) and 602 (b)(2), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both at 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 I understand the obligations of Section 602 (b)(1), Florida Statutes.

SIGNATURE

Signature of Registered Agent or Secretary of Corporation

Signature of Registered Agent or Secretary of Corporation

Signature

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME DPST RINCON, LUIS ANGEL	1. NAME DPST RINCON, LUIS A., JR.	XX Change	XX Addition
2. STREET ADDRESS 4001 N OCEAN BLVD #A601	2. STREET ADDRESS 4001 N. Ocean Blvd., #A601	☐ Change	☐ Addition
3. CITY BOCA RATON FL	3. CITY Boca Raton, FL	☐ Change	☐ Addition
4. NAME	4. NAME	☐ Change	☐ Addition
5. STREET ADDRESS	5. STREET ADDRESS	☐ Change	☐ Addition
6. CITY	6. CITY	☐ Change	☐ Addition
7. NAME	7. NAME	☐ Change	☐ Addition
8. STREET ADDRESS	8. STREET ADDRESS	☐ Change	☐ Addition
9. CITY	9. CITY	☐ Change	☐ Addition
10. NAME	10. NAME	☐ Change	☐ Addition
11. STREET ADDRESS	11. STREET ADDRESS	☐ Change	☐ Addition
12. CITY	12. CITY	☐ Change	☐ Addition
13. NAME	13. NAME	☐ Change	☐ Addition
14. STREET ADDRESS	14. STREET ADDRESS	☐ Change	☐ Addition
15. CITY	15. CITY	☐ Change	☐ Addition
16. NAME	16. NAME	☐ Change	☐ Addition
17. STREET ADDRESS	17. STREET ADDRESS	☐ Change	☐ Addition
18. CITY	18. CITY	☐ Change	☐ Addition
19. NAME	19. NAME	☐ Change	☐ Addition
20. STREET ADDRESS	20. STREET ADDRESS	☐ Change	☐ Addition
21. CITY	21. CITY	☐ Change	☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 110.01 (b), 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 a made under oath; that I am an officer or director of the corporation or the person or persons empowered to execute this report as required by Chapter 602, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on a supplemental annual report.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Luis A. Rincon, Jr.

4/26/95

(305) 592-4300