Applied For

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

DOCUMENT # V64854 1. Corporation Name

DIVERSIFIED TECHNICAL RESOURCES, INC.

Principal Place of Business
3386 CYPRESS GARDEN RD.
WINTER HAVEN FL 33884

Mailing Address

2a. Mailing Address

3386 CYPRESS GARDEN RD. WINTER HAVEN FL 33884

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90158 042 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

09/18/1992

4. FEI Number

2. Principal Place of Business		2a. Mailing Address			4. 12. 14.	•	121-4-0	pplicable	
	26					59-3118009	<u> </u>		
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desire	ed 🗇 -	\$8.75 .Add Fee Requ		
¬ 27									
City & State City & State						6. Election Campaign Finance	ing 🗆	\$5.00 M Added to	· 1
28						Trust Fund Contribution			-669
Zip Country Zip			Cou	Country		8. This corporation owes the	current year Ir	itangible ☑Yes □	JNo ↓
			30			Personal Property Tax.	Besisters		
<u> </u>	9. Name and Address of Current	Registered Agent				10. Name and Address of N	ew Kedistered	Agent	
				81	Name	•	•		
STEWART, DONALD G 3388 CYPRESS GARDENS RD. #2 WINTER HAVEN FL 33884				82	Street Addre	ess (P.O. Box Number is Not Ac	ceptable)		
						<u> </u>			
				83					Į
				84	City			85 Zip Co	ode
				1 - 1	City		<u> </u>		
	o the provisions of Sections 607.0502	and 607 1508. Florida 5	Statutes, the a	above	named corpo	oration submits this statement for	r the purpose	of changing its re	gistered stered
11. Pursuant to office or re	o the provisions of Sections 607.0502 egistered agent, or both, in the State o	f Florida. Such change	was authorize	d by t	he corporation	on's board of directors. I nereby	accept the app	Official Control	
agent. I an	egistered agent, or both, in the State on familiar with, and accept the obligation	ons of, Section 607.050	5, FIUING SIG	iuica.					
SIGNATURE		and title if applicable	(NOTE: Registere	d Agent	signature required	d when reinstating)	DATE		
	Signature, typed or printed name of registered agent OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES T	O OFFICERS		S IN 12
12.		DELE	TE 1.1 T	TITLE				Change	Addition :
TITLE	P DAVID I	_	121	NAME					
NAME	STEWART, DAVID J.				ADDRESS				
STREET ADDRESS	634 LAKE DEXTER CIR			CITY-ST					
CITY-ST-ZIP	WINTER HAVEN FL 33884	☐ DELE		TITLE	-211			☐ Change	☐ Addition
TITLE	VST	☐ DECE		NAME					
NAME	STEWART, DONALD G		I -		*******				
STREET ADDRESS	3388 CYPRESS GARDENS RD	#2			ADDRESS .:			* • •	
CITY-ST-ZIP	WINTER HAVEN FL 33884			CITY-S	T-ZIP			☐ Change	Addition
TITLE		☐ DELE	1	TITLE					
NAME				NAME	1		•		
STREET ADDRESS			3.3	STREET	ADDRESS				
CITY-ST-ZIP				CITY-S	T-ZIP			Change	Addition
TITLE		☐ DELE	ETE 4.1	TITLE	ļ			٠. ت	
NAME				NAME					
					I				
STREET ADDRESS			4.3	STREE	ADDRESS				
STREET ADDRESS				STREET CITY-S	1			Channe Channe	Addition
CITY-ST-ZIP		☐ DEU	4.4		1	· · · · · · · · · · · · · · · · · · ·	· .	Change	Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DEU	4.4 ETE 5.1 5.2 5.3 5.4	CITY-S TITLE NAME STREE	T-ZIP			· · · · ·	
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indicated on this annual report or supplemental annual report is true and accurate and that my signature shall be supplemental annual report of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and officer or director of the corporation of the receiver of the receiver of the corporation of the receiver of

SIGNATURE: