I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: MARK A LEWIS

Electronic Signature of Signing Officer/Director Detail

# Current Mailing Address: 2688 CREEK RIDGE DRIVE

**Current Principal Place of Business:** 

GREEN COVE SPRINGS, FL 32043

### FEI Number: 45-5421181

2688 CREEK RIDGE DRIVE GREEN COVE SPRINGS, FL 32043

DOCUMENT# P12000044038

#### Name and Address of Current Registered Agent:

Entity Name: PAAS TEKNIKL INCORPORATED

LEWIS, MARK A 2688 CREEK RIDGE DRIVE GREEN COVE SPRINGS, FL 32043 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## Officer/Director Detail :

Title	P,T	Title	VP,S
Name	LEWIS, MARK A	Name	LEWIS, TAMMY L
Address	2688 CREEK RIDGE DRIVE	Address	2688 CREEK RIDGE DRIVE
City-State-Zip:	GREEN COVE SPRINGS FL 32043	City-State-Zip:	GREEN COVE SPRINGS FL 32043

Certificate of Status Desired: No

#### FILED Apr 28, 2015 Secretary of State CC8665362633

04/28/2015 Date

Date