I hereby certify that the information inc	licated on this report or supplemental report is t	true and accurate and that my electronic	c signature shall have the same legal el	ffect as if made u

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.

SIGNATURE: MARK A LEWIS

Electronic Signature of Signing Officer/Director Detail

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

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

DOCUMENT# P12000044038

Entity Name: PAAS TEKNIKL INCORPORATED

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

2688 CREEK RIDGE DRIVE GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

2688 CREEK RIDGE DRIVE GREEN COVE SPRINGS. FL 32043

FEI Number: 45-5421181

Name and Address of Current Registered Agent:

FILED Mar 23, 2017 Secretary of State CC1024889685

Certificate of Status Desired: No

03/23/2017 Date

Date

PRESIDENT