

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **683731** (4)  
1. Corporation Name  
**SPRING TECH., INC.**



Principal Place of Business: **6125 WEST 21 COURT C/O CLIFFORD A. SPRING, JR. HIALEAH FL 33016**  
Mailing Address: **6125 WEST 21 COURT C/O CLIFFORD A. SPRING, JR. HIALEAH FL 33016**

3. Date Incorporated or Qualified: **10/03/1980**  
3a. Date of Last Report: **05/01/1995**  
4. FEI Number: **59-2048512**  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business  
21. Suite, Apt. #, etc.  
22. City & State  
23. Zip  
24. Country  
2a. Mailing Address  
26. Suite, Apt. #, etc.  
27. City & State  
28. Zip  
29. Country  
30.

9. Name and Address of Current Registered Agent  
**SPRING, CLIFFORD A., JR.  
~~14280 SABAL DRIVE~~  
~~MIAMI LAKES FL 33014~~**

10. Name and Address of New Registered Agent  
81. Name: **SPRING, CLIFFORD A., JR.**  
82. Street Address (P.O. Box Number is Not Acceptable): **7066 S.W. 101 WAY**  
83.  
84. City: **PEMBROKE PINES FL** 85. Zip Code: **33331**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and Florida address. (4038) Registered Agent signature to parent when necessary.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b>	1.1 TITLE	<b>P</b>
NAME	<b>SPRING, CLIFFORD A., JR.</b>	1.2 NAME	<b>SPRING, CLIFFORD A., JR.</b>
STREET ADDRESS	<b>14280 SABAL DRIVE</b>	1.3 STREET ADDRESS	<b>7066 S.W. 101 WAY</b>
CITY-ST-ZIP	<b>MIAMI LAKES FL</b>	1.4 CITY-ST-ZIP	<b>PEMBROKE PINES, FL 33331</b>
TITLE	<b>ST</b>	2.1 TITLE	
NAME	<b>SPRING, RICHARD A.</b>	2.2 NAME	
STREET ADDRESS	<b>1921 NW 180 WAY</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PEMBROKE PINES FL</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *[Signature]* **CLIFFORD A SPRING JR** 5-7-96 (305) 821 2677  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)