

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001362

Entity Name: SPECTRUM ANALYTICAL, INC.

FILED  
Mar 24, 2009  
Secretary of State

**Current Principal Place of Business:**

11 ALMGREN DRIVE  
AGAWAM, MA 01001

**New Principal Place of Business:**

**Current Mailing Address:**

11 ALMGREN DRIVE  
AGAWAM, MA 01001

**New Mailing Address:**

FEI Number: 04-3093277

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FIORINI, MICHAEL L  
8405 BENJAMIN ROAD STE A  
TAMPA, FL 33634 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPS ( ) Delete  
Name: TAYEH, HANIBAL  
Address: 11 ALMGREN DRIVE  
City-St-Zip: AGAWAM, MA 01001

Title: DT ( ) Delete  
Name: FIORINI, MICHAEL L  
Address: 927 RIVER BASIN COURT UNIT 102  
City-St-Zip: BRADENTON, FL 34212

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL L FIORINI

DT

03/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date