

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **M79600** (6)
1. Corporation Name
EARTECH, INC.



Principal Place of Business
**3904 9TH AVE W
BRADENTON FL 34205**

Mailing Address
**3904 9TH AVE W
BRADENTON FL 34205**

2. Principal Place of Business

2a. Mailing Address

21 Subt. Apt. #, etc.

26 Subt. Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

**KRYWKO, MARK A.
3904 9 AVE W
BRADENTON FL 34205**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified
05/02/1988

3a. Date of Last Report
04/19/1995

4. FEI Number
59-2882239

Applied For Not Applicable

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. 193.032, Florida Statutes Yes No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0509 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0509, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

| | | |
|----------------|----------------------------|---------------------------------|
| TITLE | DPS | <input type="checkbox"/> DELETE |
| NAME | KRYWKO, MARK | |
| STREET ADDRESS | 3904 9TH AVE., WEST | |
| CITY-STATE-ZIP | BRADENTON FL | |
| TITLE | DV | <input type="checkbox"/> DELETE |
| NAME | KRYWKO, MARJA | |
| STREET ADDRESS | 3904 9TH AVE., WEST | |
| CITY-STATE-ZIP | BRADENTON FL | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-STATE-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-STATE-ZIP | | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-STATE-ZIP | | |

13.

| | | |
|----------------------|--|---|
| 13.1 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13.2 NAME | | |
| 13.3 STREET ADDRESS | | |
| 13.4 CITY-STATE-ZIP | | |
| 13.5 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13.6 NAME | | |
| 13.7 STREET ADDRESS | | |
| 13.8 CITY-STATE-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13.9 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13.10 NAME | | |
| 13.11 STREET ADDRESS | | |
| 13.12 CITY-STATE-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13.13 TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13.14 NAME | | |
| 13.15 STREET ADDRESS | | |
| 13.16 CITY-STATE-ZIP | | |

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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 19.07(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 trustee 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: *Marja Krywko, VP* **MARJA KRYWKO, VP** 4-25-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)