

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000006792

FILED  
May 15, 2007  
Secretary of State

Entity Name: BACKFLOW TECHNOLOGY INCORPORATED

**Current Principal Place of Business:**

670 E 58TH STREET  
VIVIAN SCIRE HOUSE  
HIALEAH, FL 33013 US

**New Principal Place of Business:**

**Current Mailing Address:**

670 E 58TH STREET  
VIVIAN SCIRE HOUSE  
HIALEAH, FL 33013 US

**New Mailing Address:**

FEI Number: 65-0384800      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SCIRE, VIVIAN  
670 E 58 ST  
HIALEAH, FL 33013 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SCIRE, VIVIAN E  
Address: 670 E 58TH ST  
City-St-Zip: HIALEAH, FL 33013

Title: VD ( ) Delete  
Name: SCIRE, FRANCIS A  
Address: 670 E 58 ST  
City-St-Zip: HIALEAH, FL 33013

**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: VIVAN SCIRE

PD

05/15/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date