

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 518024 (5)

1. Corporation Name
TECHDYNE, INC.



Principal Place of Business

2230 W 77 ST.
HIALEAH FL 33016

Mailing Address

2337 W 76TH ST
HIALEAH FL 33016
US

3. Date Incorporated or Qualified 11/05/1976	3a. Date of Last Report 02/27/1995
4. FEI Number 59-1709103	Applied For Not Applicable
5. Certificate of Status Desired ☒ Yes ☐ No	\$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	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

VERGA, JOSEPH
2230 WEST 77TH STREET
HALEAH FL 33016

10. Name and Address of New Registered Agent

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code
				FL

11. Pursuant to the provisions of Sections 607.0402 and 607.1538, 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 607.0403, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Officer or Director

Signature of Agent or Director (if different from above)

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1. TITLE	DC	☐ DELETE	1. TITLE		☐ Change ☐ Addition
2. NAME	LANGBEIN, THOMAS K.		2. NAME		
3. STREET ADDRESS	777 TERRACE AVE., #517		3. STREET ADDRESS		
4. CITY, ST, ZIP	HASBROUCK HEIGHT NJ		4. CITY, ST, ZIP		
5. TITLE	PD	☐ DELETE	5. TITLE		☐ Change ☐ Addition
6. NAME	PARDON, BARRY		6. NAME		
7. STREET ADDRESS	2230 W. 77 ST.		7. STREET ADDRESS		
8. CITY, ST, ZIP	HIALEAH FL		8. CITY, ST, ZIP		
9. TITLE	VSTD	☐ DELETE	9. TITLE		☐ Change ☐ Addition
10. NAME	VERGA, JOSEPH		10. NAME		
11. STREET ADDRESS	2230 W. 77 ST.		11. STREET ADDRESS		
12. CITY, ST, ZIP	HIALEAH FL		12. CITY, ST, ZIP		
13. TITLE	V	☐ DELETE	13. TITLE		☐ Change ☐ Addition
14. NAME	HEALEY, DENNIS W.		14. NAME		
15. STREET ADDRESS	2337 W. 76 ST.		15. STREET ADDRESS		
16. CITY, ST, ZIP	HIALEAH FL		16. CITY, ST, ZIP		
17. TITLE	V	☐ DELETE	17. TITLE		☐ Change ☐ Addition
18. NAME	OUZTS, DANIEL R.		18. NAME		
19. STREET ADDRESS	2337 W. 76 ST.		19. STREET ADDRESS		
20. CITY, ST, ZIP	HIALEAH FL		20. CITY, ST, ZIP		
21. TITLE	D	☐ DELETE	21. TITLE		☐ Change ☐ Addition
22. NAME	FISCHBEIN, PETER D.		22. NAME		
23. STREET ADDRESS	777 TERRACE AVE., #517		23. STREET ADDRESS		
24. CITY, ST, ZIP	HASBROUCK HEIGHTS NJ		24. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel R. Ouzts

11/7/96 (305) 558-4000

CR2E034 (12/95)