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FILED
Jan 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # 518024 (5)

1. Corporation Name
TECHDYNE, INC.

Principal Place of Business	Mailing Address
2230 W 77 ST. HIALEAH FL 33016	2337 W 76TH ST HIALEAH FL 33016 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/05/1976

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 59-1709103 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

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 **FL** 85 Zip Code

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 title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	D'AMORE ANTHONY C.		1.2 NAME		
STREET ADDRESS	777 TERRACE AVE., #517		1.3 STREET ADDRESS		
CITY-ST-ZIP	HASBROUCK HEIGHTS NJ		1.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PARDON, BARRY		2.2 NAME		
STREET ADDRESS	2230 W. 77 ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL		2.4 CITY-ST-ZIP		
TITLE	VSTD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	VERGA, JOSEPH		3.2 NAME		
STREET ADDRESS	2230 W. 77 ST.		3.3 STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL		3.4 CITY-ST-ZIP		
TITLE	DC	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	LANGBEIN, THOMAS K.		4.2 NAME		
STREET ADDRESS	777 TERRACE AVE., #517		4.3 STREET ADDRESS		
CITY-ST-ZIP	HASBROUCK HEIGHT NJ		4.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	OUZTS, DANIEL R.		5.2 NAME		
STREET ADDRESS	2337 W. 76 ST.		5.3 STREET ADDRESS		
CITY-ST-ZIP	HIALEAH FL		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	FISCHBEIN, PETER D.		6.2 NAME		
STREET ADDRESS	777 TERRACE AVE., #517		6.3 STREET ADDRESS		
CITY-ST-ZIP	HASBROUCK HEIGHTS NJ		6.4 CITY-ST-ZIP		

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Daniel R. Ouzts VP/Director 1/7/98 (305) 558-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

SIGNATURE REQUIRED