

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P92000004605

**Entity Name:** SIRTECH PRECISION, INC.

**Current Principal Place of Business:**

1037 S.E. HOLBROOK CT  
BUILDING C, UNIT 6  
PORT ST. LUCIE, FL 34952-3431

**Current Mailing Address:**

1037 S.E. HOLBROOK CT  
BUILDING C, UNIT 6  
PORT ST. LUCIE, FL 34952-3431

**FEI Number:** 65-0369837

**Certificate of Status Desired:** Yes

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

WELCH, WALLACE  
4900 N.W. IRRINGTON TERRACE  
PORT ST. LUCIE, FL 34983 US

*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

**Officer/Director Detail :**

Title PD  
Name WELCH, WALLACE  
Address 4900 N.W. IRRINGTON TERRACE  
City-State-Zip: PORT ST. LUCIE FL 34983

Title VD  
Name WELCH, LINDA  
Address 4900 N.W. IRRINGTON TERRACE  
City-State-Zip: PORT ST. LUCIE FL 34983

Title STD  
Name WELCH, WALLACE  
Address 4900 N.W. IRRINGTON TERRACE  
City-State-Zip: PORT ST. LUCIE FL 34983

*I hereby 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 all other like empowered.*

**SIGNATURE:** WALLACE WELCH

**PRESIDENT**

**03/04/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date