

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001921

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: SFS INTEC, INC.

**Current Principal Place of Business:**

SPRING STREET & VAN REED ROAD  
WYOMISSING, PA 19610

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6326  
WYOMISSING, PA 19610

**New Mailing Address:**

FEI Number: 23-2332520

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GORY, CHRISTOPHER  
16409 BRIDGE END ROAD  
MIAMI LAKES, FL 33014 US

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

HERNANDEZ, EARL  
11225 CREEK HAVEN DR  
RIVERVIEW, FL 33569 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: EARL HERNANDEZ

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: MULLEN, MICHAEL A  
Address: SPRING STREET & VAN REED ROAD  
City-St-Zip: WYOMISSING, PA 19610

Title: V ( ) Delete  
Name: MARTINI, GARY P  
Address: SPRING STREET & VAN REED ROAD  
City-St-Zip: WYOMISSING, PA 19610

Title: T ( ) Delete  
Name: MYERS, TIMOTHY  
Address: SPRING ST & VAN REED ROAD  
City-St-Zip: WYOMISSING, PA 19610

Title: V ( ) Delete  
Name: MURRAY, ERIC D  
Address: SPRING ST & VAN REED RD  
City-St-Zip: WYOMISSING, PA 19610

Title: V ( ) Delete  
Name: BREU, JENS  
Address: 5201 PORTSIDE DR  
City-St-Zip: MEDINA, OH 44256

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: TIMOTHY MYERS

T

04/28/2006

Electronic Signature of Signing Officer or Director

Date