

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 06, 2007 8:00 am**  
**Secretary of State**

09-06-2007 90011 028 \*\*\*550.00

**DOCUMENT # F39754**

1. Entity Name  
**TECHNOLOGY/FABRICATION, INC.**



Principal Place of Business  
**1815 THORNHILL ROAD  
AUBURNDALE, FL 33823 US**

Mailing Address  
**P.O. BOX 1343  
AUBURNDALE, FL 33823 US**

**AUBURNDALE**



08312007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2101974**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BRYAN, STEWART T. JR.  
1815 THORNHILL ROAD  
SUITE 306  
AUBURNDALE, FL 33823**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
BRYAN, JR. STEWART T  
1250-17TH ST., NW  
WINTER HAVEN, FL 33881**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**STEWART T. BRYAN, JR August 31, 2007**

**863 604-0311**

ATTACHMENT

F39754

40131523

August 31<sup>st</sup> 2007

To Whom It May Concern:

This Annual Report is being submitted  
with the appropriate late fee at a total  
of \$550.00.

For some reason the only written notification  
of this report seems to be the intent to  
dissolve. This also happened last year  
but I called and a nice young lady  
told me to waive the \$400<sup>00</sup> penalty.

The 3 years prior to that I utilized a  
book keeper who filed on line for me. Would  
you please check and be sure that I will  
have a report form mailed to me next year.

863 604-0311 Thank You  
Shirley T. Bynum Jr.

Owner  
Technology/  
Education