

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G10519

FILED  
Jan 11, 2008  
Secretary of State

Entity Name: CECO CHEMICAL MFG., CO.

**Current Principal Place of Business:**

C/O BILL MATHEWS  
2990 N W 73RD ST  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BILL MATHEWS  
2990 N W 73RD ST  
MIAMI, FL 33147

**New Mailing Address:**

FEI Number: 59-2248250      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MATHEWS, BILL  
2990 NW 73RD STREET  
MIAMI, FL                      US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D                      ( ) Delete  
Name: MATHEWS, BILL,  
Address: 1280 MATHEWS STREET  
City-St-Zip: NAPLES, FL

Title: D                      ( ) Delete  
Name: MATHEWS, CATHERINE,  
Address: 1280 MATHEWS STREET  
City-St-Zip: NAPLES, FL 34117

Title: P                      ( ) Delete  
Name: MATHEWS, STEVE  
Address: 1274 MATHEWS STREET  
City-St-Zip: NAPLES, FL 34117

Title: VP                      ( ) Delete  
Name: DOMBROWSKY, ROBERT  
Address: 744 SW 159 LANE  
City-St-Zip: PEMBROKE PINES, FL 33027

**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:

I hereby certify that the information supplied with this filing does not qualify 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: STEVE MATHEWS

P

01/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date