SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # J75146

(7)

MICROTECH ENGINEERING, INCORPORATED

Principal Plac S DAVID W. 9101 NW 50T CORAL SPRIN 2. Principal P	SCHMIDT H COURT	Mailing Address % DAVID W. SCHMIDT 9101 NW 50TH COURT CORAL SPRINGS FL 33067 2a. Mailing Address 26		3. Date Incorporated or Qualified		
Suite, Apt.	#, etc	Suite, Apt. #, etc.		····	5. Certificate of Status Desired	\$8.75 Additional
City & State		27			J. Certificate of Status Desired	Fee Required
23		City & State	.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for	
24	25 9. Name and Address of Curren	29 29	30		Florida Statutes	Yes No
		n Aegisterea Agent	81	Name	10. Name and Address of New Re	gistered Agent
SCHMIDT, DAVID W.						
100 N.E. FIFTH AVE			82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)
UCI	LRAY BECH FL 33444		83			
			84	City		FL 85 Zip Code
agent. I ai SIGNATURE	egistered agent or both, in the State in familiar with and accept the obligation Signature type for profit drape ellips ferred age	ations of, Section 607.0505, Flo	rida Statutes	ne corpora:	poration submits this statement for the pition's board of directors. I hereby accept	the appointment as registered
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	PVT	DELETE	1.1 TIME	1		Change Addition
NAME	FARBER, BARRY A.		1.2 NAME			
STREET ADDRESS	9101 NW 50TH COURT		13STREFT	ADDRESS		
CHTY-ST-ZIP	CORAL SPRINGS FL	- Topieze	14 CITY - S	- 7IP		
TITLE NAME	D CADDED AND THE	DELETE	2 1 JITLE			Change Addition
STREET ADDRESS	FARBER, ARLENE 9101 NW 50TH COURT		2.2 NAME			
CITY-ST-ZIP	CORAL SPRINGS FL		2 3 STREET ADDRESS 2 4 CITY - ST - ZIP			
TITLE	CORAL SPRINGS FL			[· 7 P		Character To Laborator
NAME			3.1 TIFLE 3.2 NAME			Change Addition
STREET ADDRESS			3 3 STREET	ANNOCOC		
CITY-ST-ZIP			3.4 CITY-S			
TITLE		DELETE	4 1 TITLE		74 / 24 / 24 / 24 / 24 / 24 / 24 / 24 /	Change Addition
NAME		-	4 2 NAME	1		
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	4.4 CITY - 5	- 7IP		
THLE		DELETE	5 1 Trile			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET	ADURESS		
CITY-ST-ZIP		DELETE	5 4 City-St	- ZIP		
TITLE		DELETE	6 1 TITLE			Change Addition
NAME STREET ADDRESS			6.2 NAME			
STREET ADDRESS			63STREET			
14. I do hereb	y certify that the information supplied	with this filing is voluntable for	6 4 Cily-Si	000.001.0	tify for the exemption stated in Section 1	10.07(0)(1) [1-1-1-1-0]
made und	rify that the information included on le ler oath, that I am an officer or directo ime appears in Block 12 or Block 13 if	ir of the corolleation or the rece	ntal annua' re	port is true :	and accurate and that my signature shall add to execute this report as required by C	i s u/(J)(k), Fronda Statutes F Il have the same legal effect as if Chapter 617, Florida Statutes, and

SIGNATURE:

MATURE AND YPEO OF PRINTED NAME OF SIGNING OFFICER OR DIRECT

Bany Farber

7/30/96

(954) 345-6711