
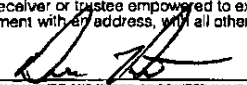


FILED
Apr 28, 2004 8:00 am
Secretary of State

03-31-2004 90027 036 ***150.00

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000046902			
1. Entity Name NORTECH ENGINEERING INC.			
Principal Place of Business 4201 75TH PLACE 1390 H COMMERCE BLVD SARASOTA, FL 34243		Mailing Address 4201 75TH PLACE 1390H COMMERCE B. SARASOTA, FL 34243	
2. Principal Place of Business 1390 Commerce Blvd Suite, Apt. #, etc. H		3. Mailing Address 1390 Commerce Blvd Suite, Apt. #, etc. H	
City & State SARASOTA FL		City & State SARASOTA FL	
Zip 34243		Country USA	
4. FEI Number 20-0135097		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NORTON, CARLOS 4201 75TH PLACE SARASOTA, FL 34243		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PSD HERBERT, DENNIS 4931 19TH ST. E. BRADENTON, FL 34203		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP VTD NORTON, CARLOS 4201 75TH PLACE SARASOTA, FL 34243		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: X  DENNIS HERBERT		Date 3/25/04 Daytime Phone # 941-720-4421	