## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000100336

OCE TECHNICI COIEC INC

FILED May 02, 2005 Secretary of State

Entity Na	me: SCF IEC	HINOLOGIES, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
10880 SW 89 ST MIAMI, FL 33176				10880 SW 89 ST MIAMI, FL 33176 US			
Current M	lailing Addres	s:	New Maili	New Mailing Address:			
10880 SW 89 ST MIAMI, FL 33176			10880 SW MIAMI, FL		IS		
FEI Number	:	FEI Number Applied For ( )	FEI Number Not App	licable (X)	Certifica	ate of Status Desired ( )	
Name and	d Address of C	urrent Registered Agent:	Name and	Address o	f New Reg	jistered Agent:	
CRUZ, FE 10880 SW MIAMI, FL	' 89 ST						
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	d office or r	registered agent, or both,	
SIGNATU	RE:						
	Electron	ic Signature of Registered Age	ent			Date	
		3(2)(b), F.S., the corporation did no Trust Fund Contribution ( ).	ot receive the prior notic	e.			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () CRUZ, FERNAN 10880 SW 89 S MIAMI, FL 331	т	Title: Name: Address: City-St-Zip:	D CRUZ, FERI 10880 SW 8 MIAMI, FL 3	9 ST	( ) Addition	
Title: Name: Address: City-St-Zip:	P () LAMY, SPENCE 10880 SW 89 S MIAMI, FL 331	т	Title: Name: Address: City-St-Zip:	D LAMY, SPEN 10880 SW 8 MIAMI, FL 3	9 ST	( ) Addition	
Title: Name: Address: City-St-Zip:	D () PADRON, CAMI 10880 SW 89 S MIAMI, FL 331	Т	Title: Name: Address: City-St-Zip:	D PADRON, C 10880 SW 8 MIAMI, FL 3	9 ST	( ) Addition	
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	P FORTOU, LO 5764 SW 77 MIAMI, FL 3	TERRACE	(X) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FERNANDO CRUZ 05/02/2005 D