

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000052679

Entity Name: NEW TECH MFG., INC.

FILED  
Apr 11, 2009  
Secretary of State

**Current Principal Place of Business:**

2137 SW AZURE AVE  
PORT SAINT LUCIE, FL 34953 1

**Current Mailing Address:**

2137 SW AZURE AVE  
PORT SAINT LUCIE, FL 34953 1

**New Principal Place of Business:**

545 NW MERCANTILE PLACE  
SUITE 102  
PORT SAINT LUCIE, FL 34953 1

**New Mailing Address:**

545 NW MERCANTILE PLACE  
SUITE 102  
PORT SAINT LUCIE, FL 34953 1

FEI Number: 06-1372117      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: PTD ( ) Delete  
Name: WYKOWSKI, STANLEY C  
Address: 2137 SW AZURE AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: SD ( ) Delete  
Name: WYKOWSKI, AUDREY I  
Address: 2137 SW AZURE AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34953

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: STANLEY C WYKOWSKI

PRES

04/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date