

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000017113 (0)**

1. Corporation Name
TWIN - TECH, INC.



Principal Place of Business
**1441 SW 30TH AVE.
STE. 8
POMPANO BCH. FL 33069
US**

Mailing Address
**1441 SW 30TH AVE
STE. 8
POMPANO BCH. FL 33069
US**

3. Date Incorporated or Qualified **03/04/1993** 3a. Date of Last Report **05/16/1995**

4. FEI Number **65-0399703** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

21 **1441 SW 30th Ave** 2a. Mailing Address

22 **Suite 8** 26 **1441 SW 30th Ave**

23 **Pompano Beach FL** 27 **Suite 8**

24 **33069** 25 **Broward** 29 **33069** 30 **Broward**

9. Name and Address of Current Registered Agent

**PATAK, JOHN J
.10700 NW 14TH ST.
#151
PLANTATION FL 33322**

10. Name and Address of New Registered Agent

81 Name **Twin-Tech, Inc**

82 Street Address (P.O. Box Number is Not Acceptable)
1441 SW 30th Ave Ste #8

83

84 City **Pompano Beach FL** 85 Zip Code **33069**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *John J Patak* **John J Patak President** DATE **4/22/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	PATAK, JOHN J <input type="checkbox"/> DELETE	1.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	10700 NW 14TH ST., #151	1.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33322	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<input type="checkbox"/> DELETE	2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<input type="checkbox"/> DELETE	3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<input type="checkbox"/> DELETE	4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<input type="checkbox"/> DELETE	5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	800001829788
CITY-ST-ZIP		5.4 CITY-ST-ZIP	-05/20/96--01056--004
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<input type="checkbox"/> DELETE	6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	***200.00
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *John J Patak* **John J Patak Pres.** DATE **4/22/96** PHONE **954-969-0199**

CR2E034 (12/95)