

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007 08:00 A
Secretary of State

DOCUMENT # P94000036102

1. Entity Name
ACCU-TECH INTERNATIONAL INC.



Principal Place of Business
**16642 US HWY 19 NORTH
HUDSON, FL 34667 US**

Mailing Address
**16642 US HWY 19 NORTH
HUDSON, FL 34667 US**



01032007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3248930

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MOCKUS, STANLEY L.
16641 CARA CARA CT
SPRINGHILL, FL 34610**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**000000579628
01/10/07-80014-025 150.00**

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **MOCKUS, STANLEY L.**
STREET ADDRESS **16641 CARA CARA CT.**
CITY-ST-ZIP **SPRING HILL, FL 34610**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

1-05-07

Date

Office Phone #

**127
813-9996**