

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 18 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000018878 (4)

1. Corporation Name

SPEC-TEC MANUFACTURING, INC.



Principal Place of Business 9933 WESTVIEW DRIVE #427 CORAL SPRINGS FL 33076	Mailing Address 9933 WESTVIEW DRIVE #427 CORAL SPRINGS FL 33076-2526
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2. Principal Place of Business 21 12247 NW 35 ST Suite, Apt. #, etc. 22 City & State 23 CORAL SPRINGS, FL Zip Country 24 33065 25 USA		2a. Mailing Address 26 12247 NW 35 ST Suite, Apt. #, etc. 27 City & State 28 CORAL SPRINGS, FL Zip Country 29 33065 30 USA		3. Date Incorporated or Qualified 02/29/1996	3a. Date of Last Report
				4. FEI Number 65-0650393	Applied For Not Applicable
				5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent FILINGS, INC. 3732 N.W. 16TH STREET FORT LAUDERDALE FL 33311				10. Name and Address of New Registered Agent 81 Name Charles Scott Barrett 82 Street Address (P.O. Box Number is Not Acceptable) 12247 NW 35 Street 83 84 City CORAL SPRINGS FL 85 Zip Code 33065	
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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 *CS Barrett Charles Scott Barrett* DATE 1-9-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BARRETT, SCOTT 9933 WESTVIEW DRIVE #427 CORAL SPRINGS FL 33076 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	P Scott Barrett 12247 NW 35 Street CORAL SPRINGS, FL 33065 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CHIARIZIO, MARTIN 9933 WESTVIEW DRIVE #427 CORAL SPRINGS FL 33076 <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	V Martin CHIARIZIO 12247 NW 35 Street CORAL SPRINGS, FL. 33065 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BARRETT, TRACY 9933 WESTVIEW DRIVE #427 CORAL SPRINGS FL 33076 <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	S/T Tracy Barrett 12247 NW 35 Street CORAL SPRINGS, FL. 33065 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 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 *CS Barrett Charles Scott Barrett* DATE 1-9-97 954-796-2445

CR2E034 (9/96)