## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Mar 16, 2000 8:00 am **DOCUMENT # 199665** 1. Entity Name **Secretary of State** METAL TECH, INC. 03-16-2000 90066 006 \*\*\*150.00 Mailing Address Principal Place of Business 7635 WEST SECOND COURT 7635 WEST SECOND COURT HIALEAH FL 33014-1305 HIALEAH FL 33014-4305 UUUUUUU~ 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-0802345 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BUZZELLA, MICHAEL J Street Address (P.O. Box Number is Not Acceptable) 10980 SW 38 DRIVE **DAVIE FL 33328** Zip Code City FL 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. 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change 200 ☐ Addition TITLE 4000 Delete TITI F NAME NAME BUZZELLA.JOSEPH R. STREET ADDRESS STREET ADDRESS 6200 S.W. 183RD WAY CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL Change Addition යුගය TITLE PC COB ☐ Delete TITLE NAME NAME BUZELLA, MICHAEL J. STREET ADDRESS STREET ADDRESS 10980 SW 38 DR CITY-ST-ZIP CITY-ST-ZIP <u>Davie fl</u> ☐ Change Addition TITLE ☐ Delete TITLE EPHEN P. NAMÉ NAME B431 KW 193 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI. TITI F ☐ Delete TITLE Change ★ Addition RICHARD J. BUZZELLA NAME 7316 JACARANDA LAKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITI F ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE OF SIGNING OFFICER OR DIRECTOR

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