FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

Apr 02, 2002 8:00 am Secretary of State DOCUMENT # F96000006618 1. Entity Name 04-02-2002 90955 048 ***150.00 UNIVERSAL TECHNICAL RESOURCE SERVICES, INC. Principal Place of Business Mailing Address 950 N. KINGS HIGHWAY, SUITE 208 950 N. KINGS HIGHWAY. SUITE 208 CHERRY HILL NJ 08034 CHERRY HILL NJ 08034 2. Principal Place of Business 3. Mailing Address KINGS HIGHWAY 950 N. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE SUITE City & State 4. FEI Number Applied For 22-2684542 HILL, NJ Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired U.S.A. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code 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, 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 Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 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 TITLE CD ☐ Delete TITLE Change Addition CR2E034 (9/01 NAME MCLEAN, LAMONT NAME 950 N. KINGS HIGHWAY, SUITE 208 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CHERRY HILL NJ 08034** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE **PSD** ZALCMANN, ALBERT NAME 950 N. KINGS HIGHWAY, SUITE 208 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHERRY HILL NJ 08034 CITY-ST-ZIP ☐ Delete CEOLD ☐ Change DSD Addition TITLE TITLE NAME WRIGHT, GERALD NAME STREET ADDRESS 950 N. KINGS HIGHWAY, SUITE 208 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHERRY HILL NJ 08034 ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITI F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F Change ☐ Addition 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.