2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with

SIGNATURE:

May 17, 2001 8:00 am Secretary of State DOCUMENT # P0000056497 1. Entity Name SCOTECH, INC. 05-17-2001 90394 022 ***150.00 Mailing Address Principal Place of Business 3149 PONCE DE LEON BLVD..UNIT #7 3149 PONCE DE LEON BLVD..UNIT #7 ST.AUGUSTINE FL 32084 ST.AUGUSTINE FL 32084 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable \$8.75 Additional Country Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name INTERNOSCIA, DAVID J Street Address (P.O. Box Number is Not Acceptable) 3149 PONCE DE LEON BLVD., UNIT #7 ST.AUGUSTINE FL 32084 City Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Change ☐ Addition **PTSD** TITLE □ Delete TITLE SCOTT, CHARLES NAME NAME 3149 PONCE DE LEON BLVD.,UNIT #7 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST.AUGUSTINE FL 32084 ☐ Change ☐ Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 in the and occurate 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 impower to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

tother like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

attachment BODS (078

Professional Tax Service
3149 Ponce de Leon Blvd. Unit # 7
St. Augustine, FL 32084

Phone: (904)829-1818 Fax: (904)829-1505

Division of Corporations
Uniform Business Report Fillings
PO Box 1500
Tallahassee, FL 32302-1500

P0000056497

May 9, 2001

To Whom It May Concern:

Please be advised that Mr. Charles Scott, President and only shareholder of Scotech, Inc. was out of the United States on business from February 5th, 2001 and did not return to the United States until May 5th, 2001 at which time he was made aware of the filing of the Uniform Business Report. Since this was his first year of the corporation he had no knowledge of this Report and was not able to be reached overseas.

At this time we would like to make a formal request on behalf of Scotech, Inc. to waive any penalty for late filing. If additional information is required, the overseas itinerary can be supplied.

Thanking you in advance for your consideration in this matter.

Respectfully Submitted,

David J. Internoscia Professional Tax Service