

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90135 044 ***158.75

DOCUMENT # P00000091943
1. Entity Name
EVERGLADES PERFORMANCE ENGINEERING, INC.

Principal Place of Business
 11293 NW 11TH COURT
 CORAL SPRINGS FL 33071

Mailing Address
 11293 NW 11TH COURT
 CORAL SPRINGS FL 33071



2. Principal Place of Business
2050 N ANDREWS AVE #107

3. Mailing Address
2050 N. ANDREWS AVE #107

Suite, Apt. #, etc.
POMPANO BEACH FL

Suite, Apt. #, etc.
POMPANO BEACH FL

DO NOT WRITE IN THIS SPACE

City & State

City & State

Zip
33069-1490

Country
USA

Zip
33069-1409

Country
USA

4. FEI Number **65-1044351**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

PAGE, ROBERT C
11293 NW 11TH COURT
CORAL SPRINGS FL 33071

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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 *Robert C. Page* **ROBERT C. PAGE** **02/20/02**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP PAGE, ROBERT C 11293 NW 11TH COURT CORAL SPRINGS FL 33071 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DOUGLAS, KENNETH S 810 SE 6TH AVE POMPANO BEACH FL 33060 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EDITH M. PAGE, DIRECTOR <input type="checkbox"/> Delete 7298 BROOKWOOD DR BROOKFIELD OHIO 44403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR <input type="checkbox"/> Delete PAUL DOUGLAS 872 N BEL AIR DRIVE PLANTATION
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C.J. ANDARY, DIRECTOR <input type="checkbox"/> Delete 2709 ASPEN LANE BLOOMFIELD HILLS MI 48302
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR <input type="checkbox"/> Delete RICHARD MUNGER 56 HORTON LANE NEW CANAAN CT 06840

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition EDITH PAGE 7298 BROOKWOOD DRIVE BROOKFIELD OHIO 44403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition PAUL DOUGLAS 872 N. BEL AIR DRIVE PLANTATION FL 33317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition CASIMIR ANDARY 2709 ASPEN LANE BLOOMFIELD HILLS, MI 48302
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition RICHARD MUNGER 56 HORTON LANE NEW CANAAN, CT 06840

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 an other like empowered.

SIGNATURE: *Robert C. Page* **Robert C. PAGE** **02/20/02** **954 971 9544**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

01815133 AV

01815133 (9/01)