2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000116590

SIGNATURE: TANYA DIAMOND SIGNATURE AND TYPED OR PRINTED NAME:



FILED Mar 17, 2003 8:00 am Secretary of State

1. Entity Name MACK TECHNOLOGIES FLORIDA, INC.					03-17-2003 90118	021 ***13	58./5
Principal Place of Business 7505 TECHNOLOGY DR MELBOURNE, FL 32904		Mailing Address 7505 TECHNOLOGY DR MELBOURNE, FL 32904					
2. Principal F	Place of Business	3. Mailing Address					
Suite, Apt. #, etc.		, Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State		City & State			4. FEI Number 59-2811039		oplied For lot Applicable
Zip	Country 6. Name and Address of Curren	Zip	Country		5. Certificate of Status Desired X 7. Name and Address of New Reglatered	\$8.75 Ad Fee Require	eq
SARTORY LINK, WENDY ESQ C/O ACKERMAN, LINK & SARTORY, P.A. 222 LAKEVIEW AVE, STE 1250 W PALM BEACH, FL 33401			Stre	Name RICHARD M BIRON Street Address (P.O. Box Number Is Not Acceptable) 7505 TECHNOLOGY DRIVE			
the obligate	Signalum. Synol or primed name of myssemul agen "LE'NOWI!!" FEE IS \$150.00 May 1, 2003 Fee will be \$550.00	and the if applicable. (NOT)	City registered office E: Registered Agents	MET BC	d agent, or both, in the State of Florida. 1 am Content	familiar with	904
10.	Payable to Florida Department: OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	IS IN 11
TITLE NAME STREET ADDRESS CITY-S1-2P	C LEUNG, JULIO 847 GIBRALTAR DRIVE, BLDG. MILPITAS, CA 95035	∑ Celete	TITLE NAME STREET ADORS CITY-ST-ZIP	RON 27 C	CIDENT JELLISON ARLISLE ROAD FORD, MA 01886	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZP		☐ Delete	TITLE NAME STREET ADDRO CITY-ST-ZIP	TREA FLOR 608	SURER ENCE BELNAP WARM BROOK ROAD NGTON, VT 05250	☐ Change	* Addition
NAME STREET ADDRESS CITY-ST-ZIP		. Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP	SECR TANY 27 C	ETARY A DIAMOND ARLISLE ROAD FORD, MA 01886	☐ Change	X Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRI CITY-ST-ZIP	ESS		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-2P		☐ Delete	TITLE , NAME STREET ADDRE CITY-ST-2IP	SSS		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	- TITLE NAME STREET ADDRE CITY-ST-ZIP	iss		☐ Change	Addition .
Indicated of the corp	ertify that the information supplied with on this report or supplemental report poration or the receiver or trustee emp or on an attachment with an address,	s true and accurate and that movered to execute this report.	ny signature sh: as repuired by	stated in Sect all have the sa Chapter 607,	tion 119.07(3)(1), Florida Statutes. I further ce time legal effect as If made under oath; that I Florida Statutes; and that my name appears	rtify that the in am an officer in Block 10 or	nformation or director r Block 11 if