

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 14, 2002 8:00 am**  
**Secretary of State**

05-14-2002 90338 045 \*\*\*150.00

DOCUMENT # PO1000018132 ✓  
1. Entity Name  
DAYTECH CONSULTING, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
21 TOMOKA COVE WAY  
Sute. Apt. #, etc.

3. Mailing Address  
21 TOMOKA COVE WAY  
Sute. Apt. #, etc.

City & State  
ORMOND BEACH, FL  
Zip  
32174  
Country

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ORMOND BEACH, FL  
Zip  
32174  
Country

4. FEI Number  
59-3700729  
Applied For  
 Not Applicable

DO NOT WRITE IN THIS SPACE

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

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent  
Name BABAZADEH, ALI  
Street Address (P.O. Box Number is Not Acceptable)  
21 TOMOKA COVE WAY  
City ORMOND BEACH FL Zip Code 32174

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 Ali Babazadeh, President 4/30/02  
Signature, typed or printed name of registered agent and title if applicable NOTE: Registered Agent signature required when reinstating

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

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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	<u>President</u> <u>BABAZADEH, ALI</u> <u>21 TOMOKA COVE WAY</u> <u>ORMOND BEACH, FL</u> <u>32174</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.  
SIGNATURE: Ali Babazadeh BABAZADEH 4/30/02 (386) 577-1271  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone  
President

CR2E034B (12/01)