

2002 UNIFORM BUSINESS REPORT (UBR)

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

05-22-2002 90106 004 ***158.75

DOCUMENT # P94000049322

1. Entity Name
PURIFICATION TECHNOLOGIES, INC.

Principal Place of Business

**1605 HOBBS STREET
TAMPA FL 33619
US**

Mailing Address

**1605 HOBBS STREET
TAMPA FL 33619
US**



2. Principal Place of Business

10325 Windhorst Road
Suite, Apt. #, etc.

3. Mailing Address

10325 Windhorst Road
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Tampa, FL

City & State

Tampa, FL

4. FEI Number

65-0513086

Applied For

Not Applicable

Zip

33619

Country

Hillsborough

Zip

33619

Country

Hillsborough

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**COLDIRON, JAMES B
1605 HOBBS STREET
TAMPA FL 33619**

7. Name and Address of New Registered Agent

Name **James B. Coldiron**

Street Address (P.O. Box Number is Not Applicable)
10325 Windhorst Road

City **Tampa**

FL

Zip Code **33619**

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

[Signature]

4-30-02

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	P	☐ Delete
NAME	COLDIRON, JAMES B	
STREET ADDRESS	1605 HOBBS STREET	
CITY-ST-ZIP	TAMPA FL 33619	
TITLE	ST	☐ Delete
NAME	COLDIRON, HOLLY S	
STREET ADDRESS	1605 HOBBS STREET	
CITY-ST-ZIP	TAMPA FL 33619	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	address only	☒ Change ☐ Addition
NAME	10325 Windhorst Road	
STREET ADDRESS	Tampa, FL 33619	
CITY-ST-ZIP	Tampa, FL 33619	
TITLE	address only	☒ Change ☐ Addition
NAME	10325 Windhorst Road	
STREET ADDRESS	Tampa, FL 33619	
CITY-ST-ZIP	Tampa, FL 33619	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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.

SIGNATURE: *[Signature]* **Holly Coldiron** **4-30-02** **813-620-3922**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)