

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

FILED
Jun 23, 2003 8:00 am
Secretary of State

06-09-2003 90116 009 ***150.00

DOCUMENT # **P95000008183** ✓

1. Entity Name

CHANNEL TECHNICAL SERVICES, Inc.



DO NOT WRITE IN THIS SPACE

55049497

2. Principal Place of Business

8514 S.W. 23RD PLACE

Suite, Apt. #, etc.

GAINESVILLE, FL 32607

City & State

3. Mailing Address

8514 S.W. 23RD PLACE

Suite, Apt. #, etc.

GAINESVILLE, FL 32607

City & State

DO NOT WRITE IN THIS SPACE

Zip

32607

Country

USA

Zip

32607

Country

USA

4. FEI Number

59-3300468

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

ALA S. REDDY

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

8514 S.W. 23rd Place, Gainesville, FL

City

GAINESVILLE

FL

Zip Code

32607

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$250.00

Amended UBR is \$81.25

Make Check Payable to: Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PRESIDENT
REDDY, ALA S.
8514 S.W. 23RD PLACE
GAINESVILLE, FL 32607**

TITLE
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/4/03 (352)-332-5311

Date

Daytime Phone #

CR2E034B (12/02)

ATTACHMENT

~~55049497~~
P95000008183

5/25/03

Dear Sir/Madam,

I have not received any notification for payment of Corporation fees. I just learned from my accountant that I have to pay in the month of May. Please accept our fee for Corporation in the amount of \$150=00 towards our company, women-owned minority company.

Channel Technical Services Inc.

8514 S.W. 23rd Place

Gainesville, FL 32607.

FEI # 59-3300468

Thank you Very Much,

Sincerely,
~~Ala S. Reddy~~

Ala S. Reddy

PRESIDENT