

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90181 043 ***150.00

DOCUMENT # P97000045352

1. Entity Name
TECNOL, INCORPORATED

Principal Place of Business 3370 NW 72 AVE MIAMI FL 33122	Mailing Address 3370 NW 72 AVE MIAMI FL 33756-3595
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2. Principal Place of Business 1298 LAKEVIEW RD. Suite, Apt. #, etc. CLEARWATER, FLORIDA	3. Mailing Address 1298 LAKEVIEW RD. Suite, Apt. #, etc. CLEARWATER, FLORIDA
City & State	City & State

Zip 33756	Country USA	Zip 33756	Country USA
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DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0767485** Applied For Not Applicable

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

6. Name and Address of Current Registered Agent
**BLINDERMAN, RICHARD I
 3111 STERLING RD
 FT. LAUDERDALE FL 33312**

7. Name and Address of New Registered Agent
 Name **G. WARREN SMITH**
 Street Address (P.O. Box Number is Not Acceptable)
1298 LAKEVIEW RD.
 City **CLEARWATER, FL** Zip Code **33756**

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 *G. Warren Smith* DATE 4/24/2000
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)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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	VTS LUYTEN, GERARDUS H 3370 NW 72 AVE MIAMI FL 33122 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CARNIELLI, SERGIO 3370 NW 72 AVE MIAMI FL 33122 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT MR. D. WAYNE KELLER 1298 LAKEVIEW RD. CLEARWATER, FLORIDA. 33756 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *G. Warren Smith* **G. WARREN SMITH** DATE 4/27/00 DAYTIME PHONE # 727-443-5332
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E034 (9/99)