

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2000 8:00 am
Secretary of State

05-23-2000 90222 009 ***150.00

DOCUMENT # P98000063869

1. Entity Name
AMERIDUCT WORLDWIDE, INC.

Principal Place of Business 13160 RICKENBACKER PARKWAY FORT MYERS FL 33913	Mailing Address 13160 RICKENBACKER PARKWAY FORT MYERS FL 33913-8847
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 59-3527931	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JUNGERS, CARL
9315 WINDLAKE DRIVE
FORT MYERS FL 33912

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating)
 Signature, typed or printed name of registered agent and title if applicable 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, 2000 Fee will be \$350.00~~
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 <input type="checkbox"/> Delete
NAME	JUNGERS, CARL
STREET ADDRESS	13160 RICKENBACKER PARKWAY
CITY-ST-ZIP	FORT MYERS FL 33913
TITLE	V <input type="checkbox"/> Delete
NAME	JUNGERS, DANIEL
STREET ADDRESS	13160 RICKENBACKER PARKWAY
CITY-ST-ZIP	FORT MYERS FL 33913
TITLE	VP <input type="checkbox"/> Delete
NAME	JUNGERS, CARL JR.
STREET ADDRESS	13160 RICKENBACKER PARKWAY
CITY-ST-ZIP	FORT MYERS FL 33913
TITLE	ST <input type="checkbox"/> Delete
NAME	BEDNAREK, DAVID
STREET ADDRESS	13160 RICKENBACKER PARKWAY
CITY-ST-ZIP	FORT MYERS FL 33913
TITLE	V <input type="checkbox"/> Delete
NAME	JAMIESON, PHIL
STREET ADDRESS	13160 RICKENBACKER PARKWAY
CITY-ST-ZIP	FORT MYERS FL 33913
TITLE	V <input type="checkbox"/> Delete
NAME	MORGAN, MICHAEL
STREET ADDRESS	13160 RICKENBACKER PARKWAY
CITY-ST-ZIP	FORT MYERS FL 33913

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: *David Bednarek* **David Bednarek** **4-29-00** **941-768-3366**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)