2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000110278

FILED
May 19, 2000 8:00 am
Secretary of State

04-17-2000 90034 046 ***150.00

1. Entity Name

CONNECTTECH, CORP.

Principal Place of Business
SE 25TH TERR
CORAL FL 33904

Mailing Address
211 SE 25TH TERR
CAPE CORAL FL 33904

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
1110 Pine Island Road		1110 Pine Island Road	
Suite, Apt. #, etc. # 6		Suite, Apt. #, etc. # 6	
City & State CAPE CORAL, FL		City & State CAPE CORAL, FL	
Zip 33909	Country USA	Zip 33909	Country USA

4. FEI Number 65-0970475 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KERN, ALAN R 211 SE 25TH TERR CAPE CORAL FL 33904	Name KERN, ALAN R Street Address (P.O. Box Number is Not Acceptable) 1110 Pine Island Road # 6 City CAPE CORAL FL Zip Code 33909

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 Alan R Kern ALAN R. KERN, VICE PRESIDENT 4/10/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 $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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P, T, D NAME Deborah A. Kern STREET ADDRESS 1110 Pine Island Road #6 CITY-ST-ZIP Cape Coral, FL 33909	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE V, S, D. NAME Alan R. Kern STREET ADDRESS 1110 Pine Island Road #6 CITY-ST-ZIP Cape Coral, FL 33909	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: Alan R Kern ALAN R. KERN 4/10/00 941-772-7030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)