

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 25, 2001 8:00 am**  
**Secretary of State**

07-25-2001 90040 020 \*\*\*158.75

0025801 AV

**DOCUMENT # 520346**

1. Entity Name  
**HYDRODINE CORPORATION**

(LA)

Principal Place of Business <b>2152 NW 138 TERRACE</b> <b>PEMBROKE PINES FL 33028-2626</b> <b>US</b>	Mailing Address <b>2152 NW 138 TERRACE</b> <b>PEMBROKE PINES FL 33028-2626</b> <b>US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number <b>59-1718009</b>		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
<b>POLLEY, RICHARD D.</b> <b>2152 NW 138 TERRACE</b> <b>PEMBROKE PINES FL 33028-2626</b>				Name							
				Street Address (P.O. Box Number is Not Acceptable)							
				City				<b>FL</b>		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) DATE \_\_\_\_\_

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	<b>FILE NOW!!! FEE IS \$550.00</b> <b>After September 12, 2001 Fee will be \$750.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	<b>PTSD</b>	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>POLLEY, RICHARD D.</b>			NAME			
STREET ADDRESS	<b>2152 NW 138 TERRACE</b>			STREET ADDRESS			
CITY-ST-ZIP	<b>PEMBROKE PINES FL 33028-2626</b>			CITY-ST-ZIP			
TITLE	<b>C</b>	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>POLLEY, RICHARD D.</b>			NAME			
STREET ADDRESS	<b>2152 NW 138 TERRACE</b>			STREET ADDRESS			
CITY-ST-ZIP	<b>PEMBROKE PINES FL 33028-2626</b>			CITY-ST-ZIP			
TITLE	<b>D</b>	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	<b>KETTANEH, ANTHONY</b>			NAME			
STREET ADDRESS	<b>777 BROADWAY #527</b>			STREET ADDRESS			
CITY-ST-ZIP	<b>NEW YORK NY 10116</b>			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				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: *Richard D. Polley* **RICHARD D. POLLEY** #1 April 23 '01 #2 July 5 '01 854-437-6669

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)

# Attachment

To: Florida Dept. State  
Div. of Corporations

July 5, 2001

UNIFORM BUSINESS REPORT FILINGS  
P.O. Box 1500

#52034C  
# 713732

TALLAHASSEE, FL 32302-1500

TO WHOM IT MAY CONCERN:

IN A TELEPHONE CALL LATE AFTERNOON July 3, 2001, I STATED TO YOUR OFFICE THAT I HAD JUST RECEIVED FOUR (4) 2001 UNIFORM BUSINESS REPORTS DUE BY SEPT. 12, 2001. I stated further that I had mailed the 4 reports separately on April 23, 2001 via U.S. Postal Service Certified Mail Receipt\* to the P.O. Box 1500 mentioned above.

Polley Tech Corp Post Office Receipt Number 7000 1670 0005 3337 5322

→ Hydroline Corp P.O. Receipt No. 7000 1670 0005 3337 5308

Swiver Corp " " " 7000 1670 0005 3337 5315

Biolutions Inc " " 7000 1670 0005 3337 5339

\*copy available upon request. I was told it was not necessary to provide them with this letter.

I enclosed checks with each report. But, it seems I made the same mistake on each check. I had made each check for \$150.00, but then changed my mind and decided to order the Certificate. I then changed the numerical portion on the check to \$158.75, but forgot to change the written amount section. This, in turn, caused the checks to be returned by the bank.

I apologize for this error, as it was strictly unintentional.

On this past Tuesday, I was informed that

Attachment

2. July 5, 2001

#52,0346

This ~~was~~ information was sent to the TTBTC  
4 corporations in late May. We never received  
this information, and we remained unaware of  
the problem until this past Tuesday, when the  
Sept 12, 2001 reports arrived and I called your  
offices immediately.

I was told to re-do the Receipts and  
file them immediately with checks for \$150.00  
or \$158.75, depending on whether the particular  
company desired the Certificate for the extra \$8.75.

These reports are completed and endorsed, with  
the pertinent check attached.

Again, my apologies, and Thank you for  
your indulgence in this matter important to us.

Signature,

Richard D. Polley  
Richard D. Polley

Registered Agent for All Four Corporations