2003 FOR PROFIT CORPORATION

FILED Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90436 026 ***150.00

1 0			
UNIFORM	BUSINESS	REPORT	(UBR)

DOCUMENT # 1. Entity Name

National School of Technology, Inc.

523456



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2.	DO NOT WRITE	IN THIS	SPAC	SE				
2. Principal Place of Business 3. Mailing Address 6 Hutton Centre Drive 6 Hutton Centre				Drive	- Landing Control of the Control of			
6 Hutton Centre Drive 6 Hutton Cent Suite, Apt. #, etc. 400 Suite, Apt. #, etc. 400			LC DIAVE		DO NOT WRITE IN	I THIS SPA	CE	
City & State Santa Ana, CA Santa Ana, CA		, CA	4.		FEI Number 59-1720069	er Applied For Not Applica		
Zip 92707	Country USA	Zip 92707	Cou	ntry A			☐ Fee	.75 Additional Required
	5			Name		ame and Address of Current Reg Orporation System	jistered Ag	gent
	DO NOT W			Street Add	dress (P.O. 1200	Box Number is Not Acceptable) South Pine Island	Road	
<u> </u>	IN THIS SE	PACE	•					
	named entity submits this statement for		, -	City	Planta		FL	^{Zip} 33324
SIGNATURE .	Signature, typed or printed name of registered agent	and title it applicable.	(NOTE: Registe	ed Agont signatura	required when	reinstailing) 9. Election Campaign Financi	DATE	\$5.00
Make Check	After May 1, Fee is \$550.00 Amended UBR is \$61.25 Payable to Florida Department of Confidence of the C					Trust Fund Contribution.		\$5.00 May Be Added to Fees
TITLE	C/CEO/P David G. Moore 6 Hutton Centre Dr. Santa Ana, CA 9270	ive, Suite 4	STI	LE ME REET ADDRESS Y-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Paul R. St. Pierre 6 Hutton Centre Dr Santa Ana, CA 9270	ive, Suite 4	100 sti	LE ME REET ADDRESS Y-ST-ZIP			,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Stan A. Mortensen 6 Hutton Centre Drive, Suite 400		LE ME F PEET ADDRESS Y-SI-ZIP		DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/CFO Dennis N. Beal 6 Hutton Centre Dr Santa Ana, CA 9270	ive, Suite ⁷	400 NA	LE Me Beet Address Y-st-zip		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ÿ/D Dennis L. Devereux 6 Hutton Centre Dr Santa Ana, CA 9270	ive, Suite	400 NA	LE Me Reet address Y-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>	STI	ME REET ADDRESS Y-ST-ZIP				

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 of 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 an officer or director.

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February...

2003

(714) 424-8888

Dote

Daytime Phone #