FILED

Mar 29, 2002 8:00 am

2002 Uniform Business Report (UBR)

SIGNATURE:

Secretary of State 563762 DOCUMENT # 1. Entity Name 03-29-2002 91419 018 ***150 00 ELTEC INTERNATIONAL, INC. Principal Place of Business Mailing Address PO BOX 9610 350 FENTRESS BLVD. P.O. BOX 9610 DAYTONA BEACH FL 32120-9610 DAYTONA BEACH FL 32114-1206 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1840154 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name OETTEL, FRED H. Street Address (P.O. Box Number is Not Acceptable) 350 FENTRESS BLVD. CENTRAL INDUSTRIAL PK. DAYTONA BEACH FL 32114 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, typed or printed name of registered agent and title if applicable. DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition CR2E034 (9/01 TITLE Change TITLE ☐ Delete MOLLENKOF, SAMUEL S. NAME NAME 350 FENTRESS BLVD STREET ADDRESS STREET ADDRESS DAYTONA BCH, FL 00000 CITY-ST-ZIP CITY-ST-ZIP SD ☐ Delete ☐ Change ☐ Addition TITLE TITLE BEECHER, THOMAS R NAME NAME 200 THEATER PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BUFFALO, NY 00000 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME OETTEL, FRED H NAME STREET ADDRESS STREET ADDRESS 350 FENTRESS BLVD CITY-ST-ZIP DAYTONA BCH, FL 00000 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE MAHANEY, EUGENE D NAME NAME 403 MAIN ST STREET ADDRESS STREET ADDRESS **BUFFALO NY** CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE MOLLENKOF, SAMUEL D NAME NAME 350 FENTRESS BLVD STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 32114 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ 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