2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 667645 1. Entity Name TECH-M COMPANY						Secretary of State 01-31-2002 90048 044 ***150.00					
1912 MICHIGA SUITE 116	e of Business AN AVE. NE URG FL 33703	Mailing Address 1912 MICHIGAN AVE. NE SUITE 116 ST. PETERSBURG FL 33703 US									
2. Principal Place of Business		3. Mailing Address				T TEOLIE OTGIO BUIGI 19910 ESISS OLOBS OSSS BUOLI 95915 NION BUDIL BIBIL AZOLI 1991					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State		City & State			4. F	El Number	59-1966011			plied For Applicable	-
Zip Country		Zip Coun		try	5. Certificate of Status Desire		Status Desired	\$8.75 Additional Fee Required			
	6. Name and Address of Current Re	egistered Agent			7. N	lame and A	ddress of New Re	gistered Ager	ıt		┦
FLEMING, WILLIAM P. 1912 MICHIGAN AVE, NE ST. PETERSBURG FL 33703				Name Street Addre	ress (P.O. Box Number is Not Acceptable)					,	
01.1 LIL	NODONG 1 E COVO			City				Zip Code		1	
Tax filing r	Signature, typed or printed name of registered agent and praction is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW! After May 1, 200 Make Check Payab	!! FEE 02 Fee	will be \$550.	00 State	10. Elect	lon Campaign Fina Fund Contribution HANGES TO OFFIC		Added	May Be to Fees	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DP FLEMING, WILLIAM P. 1912 MICHIGAN AVE NE ST PETERSBURG FL	□ Delete □ Delete	CITY TITLE NAM	E ET ADDRESS -ST-ZIP					Change	Addition	70, 400,000
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLI NAM STRE	- I	-		-		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete				.,			Change	☐ Addition	
TITLE Name Street address City-St-Zip		☐ Delete	1	I .					Change	Addition	
TITLE NAME Street Address City-St-Zip		□ Delete							Change	☐ Addition	
indicated of the cor	certify that the information supplied with the lon this report or supplemental report is transferior or the receiver or trustee empower, or on an attachment with an address, with the supplement with an address, with the supplement with an address, with the supplement with an address.	rue and accurate and that n rered to execute this report	nv siana	ture shall have	the same	legal effect :	as if made under oa	ath; that I am a	ın officer (or airector	

SIGNATURE: WILLIAM TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR