

2001 UNIFORM BUSINESS REPORT (UBR)

0006094 AF

DOCUMENT # **A95000000107**

1. Entity Name

NEW RIVER TECHNOLOGIES, LTD.

Principal Place of Business

**110 E. BROWARD BLVD.
P.O. BOX 163
FT. LAUDERDALE FL 33301**

Mailing Address

**110 E. BROWARD BLVD.
P.O. BOX 163
FT. LAUDERDALE FL 33301**

2. Principal Place of Business

110 E. Broward Blvd.

Suite, Apt. #, etc.

3. Mailing Address

110 E. Broward Blvd.

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL 33301

City & State

Ft. Lauderdale, FL 33301

Zip

33301

Country

Zip

33301

Country

FILED

01 APR -4 AM 9:08

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0550359

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TRIPP, NORMAN D
% TRIPP, SCOTT, CONKLIN & SMITH, P.A.
110 SOUTHEAST SIXTH ST., 15TH FL.
FT. LAUDERDALE FL 33301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$990.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P94000013427**
NAME **NEW RIVER TECHNOLOGIES, INC.**
STREET ADDRESS **110 E. BROWARD BLVD.**
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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04/12/01-01058-009

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STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

President

3/28/01

954-522-1440

New River Technologies, Inc.

Daytime Phone #

CR2E003 (11/00)