## 2003 LIMITED PARTNERSHIP **UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

## A97000002571 **DOCUMENT #**

1. Entity Name TECHNOLOGIES INTERNATIONAL ENTERPRISES, LTD.

Principal Place of Business



FILED

03 NAY 12 PM 1:30

SECRETARY OF STATE

ORLANDO FL			ORLANDO FL 32836			TALLAHASSEE, FLORIDA	
OHEMBO 12 GEGGO						A TRANSPORTER (BATA TRANSPORTER CONTRACTOR OF THE CONTRACTOR OF TH	
2. Principal Place of Business			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CUE BY MAY 1, 2003	
City & State			City & State			4. FEI Number 59-3482440 Applied For	
						Not Applicable	
· Zîp ·			Coun	ntry 	5. Certificate of Status Desired See Required Fee Required		
6. Name and Address of Current Registered Agent					Name	7. Name and Address of New Registered Agent	
LEVENTHAL, RONALD H					Name		
_8762_LAKE_TIBET_COURT					Street Addre	ess (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32836							
					City	. 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. I am familiar with, and the obligations of registered agent.							
the bongations of registered agent.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.							
9. Capital Contributions as Shown on record. \$100,000.00 10. Amount of Capital C in FLORIDA to date.					ontributions  11. MAKE CHECK PAYABLE TO FL. 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					, an amenui	ADDRESS CHANGES ONLY	
DOCUMENT #	·····	eme					
NAME		ogies international	L ENTEPRISES, INC	SIRE	ET ADDRESS		
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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: