

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90055 033 ***550.00

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AT

DOCUMENT # F02000006174

1. Entity Name

NOVAMIN TECHNOLOGY, INC.



Principal Place of Business

13709 PROGRESS BLVD., SUITE 23
ALACHUA FL 32615

Mailing Address

13709 PROGRESS BLVD., SUITE 23
ALACHUA FL 32615

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

33-1027217

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCOTT, RANDOLPH L

13709 PROGRESS BLVD., SUITE 23

ALACHUA FL 32615

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME PD
STREET ADDRESS SCOTT, RANDOLPH L
CITY-ST-ZIP 7821 N.W. 51ST DRIVE
GAINESVILLE FL 32653

TITLE ☐ Delete
NAME V
STREET ADDRESS GREENSPAN, DAVID C
CITY-ST-ZIP 3116 N.W. 62ND TERRACE
GAINESVILLE FL 32606

TITLE ☐ Delete
NAME D
STREET ADDRESS HUDSON, BANNUS B
CITY-ST-ZIP 10 ARDEN ROAD
BERKLEY CA 94704

TITLE ☐ Delete
NAME CD
STREET ADDRESS WOTIZ, ARTHUR
CITY-ST-ZIP 2415 COSTA VERDE BLVD.
JACKSONVILLE BEACH FL 32250

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS SMITH, W.K.
CITY-ST-ZIP 2405 CLARET DRIVE
FALLSTOWN, MD

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS SHUSTER, LEWIS J.
CITY-ST-ZIP 421 BRIDGEMAN TERRACE
ENCINITAS, CA 92024

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS BLAKE, JULES
CITY-ST-ZIP 867 SUNSET RIDGE
BRIDGEWATER, NJ 08807

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS DEMETREE, J.C. JR.
CITY-ST-ZIP 6671 EPPING FOREST WAY, N.
JACKSONVILLE, FL 32217

TITLE ☐ Change ☒ Addition
NAME TS
STREET ADDRESS MCLEOD, WILLIAM
CITY-ST-ZIP 5525 SW 93RD WAY
GAINESVILLE, FL 32608

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/8/03

Date

386-418-1551

Daytime Phone #

CR2E034 (10/02)