## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 05, 2001 8:00 am Secretary of State DOCUMENT # F9400005765 KAF-TECH. INC. 05-05-2001 90835 009 \*\*\*150.00 Principal Place of Business Mailing Address 12435 73RD COURT NORTH 1 TYCO-PARK LARGO FL 34643 EXETÉR NH 03833 3. Mailing Address 2. Principal Place of Business PO BOX 3038 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 04-3245920 Boca Baton Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33931-0938 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 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. 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 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, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. President/Director TITLE Delete TITLE Addition McDonough, Stephen WHEELER, ROBERT R NAME NAME 3 Tyco Par K STREET ADDRESS 55 SAMUEL BARNET BOULEVARD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Exeter- NH- 03833 **NEW BEDFORD MA 02745** Director Isecretary STD ☑ Delete TITL F TITLE Change Donerty, Bernard J. NAME KELLER, RAYMOND H NAME one tyco Park STREET ADDRESS 999 MAIN ST., #36 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Exeter NH 03833 WARREN RI 02885 Delete Addition TITLE Director TITLE Change PAPITTO, RALPH R NAME Gutin, Irving NAME STREET ADDRESS 6863 S.E. ISLE WAY STREET ADDRESS one Tyco Park CITY-ST-74P STEWART FL 34996 CITY-ST-ZIP EXETEX-NH-03833 Treasurer Addition TITLE ☐ Delete TITLE Change Rubinson, Michael Anthony NAME NAME One Town center hood STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Boca Ration FL 33486 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE 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 Biock 11 or Block 12 if changed, or on an attach ent with an address, with all other like empowered.

Scott Stevenson UP/Asst. Treas.

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR