

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 15, 2003 8:00 am**  
**Secretary of State**

09-15-2003 90149 029 \*\*\*150.00

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**DOCUMENT # F97000004227**

1. Entity Name  
**MILITARY COMMERCIAL TECHNOLOGIES, INC.**



Principal Place of Business  
**485 N. KELLER ROAD, STE. 100  
MAITLAND FL 32751**

Mailing Address  
**485 N. KELLER ROAD, STE. 100  
MAITLAND FL 32751**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3429173**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**A.G.C. CO.  
200 S. ORANGE AVE., STE. 2300  
ORLANDO FL 32801**

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 \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CEO BUFFA, MICHAEL 485 N. KELLER RD., STE. 100 MAITLAND FL 32751</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>COOP KELLEY, J. DARRELL 485 N. KELLER RD., STE. 100 MAITLAND FL 32751</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CFO MARTIN, STEVEN R 485 N. KELLER RD., STE. 100 MAITLAND FL 32751</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>GC FOUNTAS, CHRISTOPHER N 485 N. KELLER RD., STE. 100 MAITLAND FL 32751</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S WRIGHT, KENNETH C 200 S. ORANGE AVE., STE. 2300 ORLANDO FL 32801</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D DURAN, MICHAEL 485 N. KELLER RD., STE. 100 MAITLAND FL 32751</b>	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>President Zotenberg, Jason 485 N. Keller Rd. Suite 100 Maitland, FL 32751</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Josephs, Gene 485 N. Keller Rd Ste 100 Maitland, FL 32751</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Swanson, Lars 485 N. Keller Rd Ste 100 Maitland, FL 32751</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Rygiel, Ed 485 N. Keller Rd Ste 100 Maitland, FL 32751</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Weissman, Ron 485 N. Keller Rd Ste 100 Maitland, FL 32751</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D Rodrigues, Joaquin 485 N. Keller Rd Ste 100 Maitland, FL 32751</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 REQUIRED**  
**Chris Fountas**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**9/9/03 4076590443**

CR2E034 (4/03)



Attachment #  
80147921  
F97000004227

September 8, 2003

Uniform Business Report  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

Re: 2003 Uniform Business Report for Military Commercial Technologies, Inc.

Dear State Representative:

Military Commercial Technologies, Inc. ("MILCOM") is in receipt of notification stating the company's 2003 Uniform Business Report ("UBR") was not on file with the State of Florida as of June 6, 2003. Please be advised that MILCOM did not receive the initial notification to file the UBR.

Enclosed herewith please find MILCOM's completed 2003 UBR and a check for the original \$150.00 filing fee. Should you have any questions or require any additional information please contact me at (407) 659-0443.

Sincerely,

A handwritten signature in black ink, appearing to read "CF", with a long horizontal flourish extending to the right.

Christopher N. Fountas  
General Counsel