

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90294 031 ***150.00

DOCUMENT # F97000006483

1. Entity Name
QUICK-MED TECHNOLOGIES, INC.



Principal Place of Business
**401 NE 25TH TERRACE
BOCA RATON FL 33431**

Mailing Address
**401 NE 25TH TERRACE
BOCA RATON FL 33431**

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 **65-0797243**

Applied For

Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

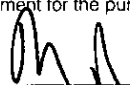
6. Name and Address of Current Registered Agent

**KLEIN, SACHS
301 YAMATO RD
BOCA RATON FL 33431**

7. Name and Address of New Registered Agent

Name **MICHAEL KARSCH**
Street Address (P.O. Box Number is Not Acceptable) **c/o SAX SACHS & KLEIN**
301 YAMATO RD
City **BOCA RATON FL** Zip Code **33431**

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

4/21/03

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

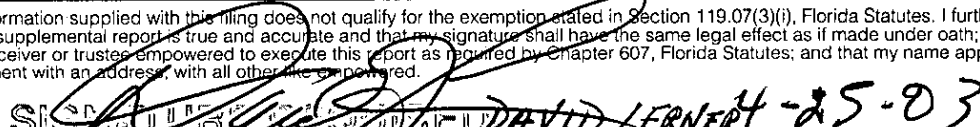
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC LERNER, DAVID 401 NE 25TH TERRACE BOCA RATON FL 33431	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C GRENITO, MICHAEL 30 E 37TH STREET NEW YORK NY 10016	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KINCH, MICHAEL 301 YAMATO RD BOCA RATON FL 33431	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHULTZ, GREGORY 1600 SW ARCHER RD GAINESVILLE FL 32610	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CERJAN, PAUL 3524 OLD COURSE LANE VALRICO FL 33594	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ODEMAN, JERRY 17 AIKMAN DRIVE BEDFORD MA 01730	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Grenito, Michael	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MICHAEL KARSCH c/o SAX SACHS & KLEIN 301 YAMATO RD. BOCA RATON FL 33431	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Olderman, Jerry	☒ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)