

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2003 8:00 am**  
**Secretary of State**

062494  
AT

**DOCUMENT # F97000006813**



1. Entity Name  
**BORAL MATERIAL TECHNOLOGIES INC.**

05-02-2003 90091 008 \*\*\*150.00

Principal Place of Business  
**45 N.E. LOOP 410, SUITE 700  
SAN ANTONIO TX 78216**

Mailing Address  
**200 MANSELL CT EAST  
#310  
ROSWELL GA 30076  
US**

**20039943**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number **58-2200607**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  Delete  
NAME **AT**  
STREET ADDRESS **TUCKER, PAMELA**  
CITY-ST-ZIP **200 MANSELL COURT EAST #310  
ROSWELL GA 30076**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME **V**  
STREET ADDRESS **STEVENS, PAUL**  
CITY-ST-ZIP **45 N.E. LOOP 410, SUITE 700  
SAN ANTONIO TX 78216**

TITLE  Change  Addition  
NAME **C, D**  
STREET ADDRESS **Dennis S. Brown**  
CITY-ST-ZIP **200 mansell court east, #310  
Roswell, GA 30076**

TITLE  Delete  
NAME **P**  
STREET ADDRESS **KEPFORD, ROBERT P**  
CITY-ST-ZIP **7500 N. DREAMY DRAW #234  
PHOENIX AZ 85020**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME **V**  
STREET ADDRESS **SHELTON, GARY D**  
CITY-ST-ZIP **200 MANSELL CT EAST #310  
ROSWELL GA 30076**

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME **AS**  
STREET ADDRESS **LEWIS, T MICHAEL**  
CITY-ST-ZIP **200 MANSEL COURT EAST #310  
ROSWELL GA 30076**

TITLE  Change  Addition  
NAME **AS, D**  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  Delete  
NAME **VSD**  
STREET ADDRESS **MCLEAN, ERNEST C III**  
CITY-ST-ZIP **200 MANSELL CT E #310  
ROSWELL GA 30076**

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: *Pamela Tucker* **Pamela Tucker**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-03 770-952-3380  
Date Daytime Phone #

CR2E034 (10/02)