## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 02, 2001 8:00 am Secretary of State DOCUMENT # F98000005655 1. Entity Name SNOWBOOT-TECH, INC. 04-02-2001 90290 030 \*\*\*150 00 Principal Place of Business Mailing Address 7100 W CAMINO REAL STE 110 7100 W CAMINO REAL STE 110 **BOCA RATON FL 33433** BOCA RATON FL 33433 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0676520 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name GRZYBOWSKI, PETER J Street Address (P.O. Box Number is Not Acceptable) 7100 W CAMINO REAL STE 110 **BOCA RATON FL 33433** Zip Code FL 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Delete TITLE TITLE GERDY, HARVEY NAME NAME STREET ADDRESS STREET ADDRESS 7850 VILLANVOA DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** Change ☐ Addition TITLE ☐ Delete TITLE WOLF, MICHAEL NAME NAME STREET ADDRESS STREET ADDRESS 22740 ELDORADO DRIVE CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** Change Addition TITLE SD \_a\_ Delete\_ TITLE\_ NAME SEDLEY, JOEL NAME STREET ADDRESS STREET ADDRESS 7876 MANDARIN DRIVE #1307 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** ☐ Change ☐ Addition TITLE □ Detete TITLE NAME GRZYBOWSKI, PETER J NAME STREET ADDRESS STREET ADDRESS 7100 W CAMINO REAL STE 110 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33433** ☐ Change ☐ Addition TITLE ☐ Delete TITLE D SATZ. LAWRENCE NAME NAME STREET ADDRESS STREET ADDRESS 215 SOUTH MASON ROAD CITY-ST-ZIP CITY-ST-7IP TOWN & COUNTRY MO 63141 Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 for 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 11 or Block 12 if

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Daytime Phone #

SIGNATURE: UNSAL

changed, or on an attachment with an address

SIGNATURE AND TYPED OF THINTED NAME OF SIGNING OFFICER OR DIRECTOR

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