

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 17, 2002 8:00 am
Secretary of State

09-17-2002 90109 005 ***150.00

DOCUMENT # G49640

1. Entity Name
PYTEK INTERNATIONAL, INC.

Principal Place of Business

9200 S. DADELAND BLVD.
STE. 523
MIAMI FL 33156
US

Mailing Address

9200 S. DADELAND BLVD.
STE. 523
MIAMI FL 33156
US

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

59-2347960

Applied For

Not Applicable

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

ELGUEZABAL IGNACIO M
13421 S.W. 72 AVE.
MIAMI FL 33156

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☐ Delete
NAME **ELGUEZABAL, IGNACIO M.**
STREET ADDRESS **13421 S.W. 72 AVE.**
CITY-ST-ZIP **MIAMI FL 33156**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
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 Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

IGNACIO M.

ELGUEZABAL

President

Date

Daytime Phone #

CR2E034 (9/01)

Attachment

Doc. # G 49640
125546
CARLOS M. PAZOS, C.P.A., P.A.

Certified Public Accountant

10840 S.W. 113th Place

Miami, Florida 33176

Tel.: 305.443.1919/Fax.: 305.443.1119

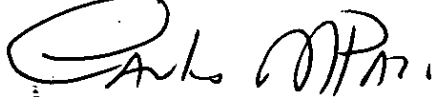
cpamiami@compuserve.com

Theodore Sarafoglu, MD. Baptist Hospital Emergency Neurosurgeon.
8950 SW 88th Street
305-271-6159

Pain Management Joseph E. Mouhanna, MD, PA
Pain Management Specialist
2601 SW 37th Avenue, Suite 806
Miami, Florida 33133

Should you have any questions do not hesitate to contact me.

Sincerely,



Carlos M. Pazos, C.P.A.

Attachment
Disc # G 49640
125546
CARLOS M. PAZOS, C.P.A., P.A.
Certified Public Accountant
299 Alhambra Circle, Suite 203
Miami, Florida 33134
Tel.: 305.443.1919/Fax.: 305.443.1119
cpamiami@compuserve.com

September 12, 2002

Annual Report Filings
Division of Corporations
Post Office Box 32302-1500
Tallahassee, Florida 32302-1500

Re: **Pytek International, Inc.**
Document Number G49640

Dear Sir/Madam:

Enclosed please find my client's annual report (UBR). Please note that I am a Certified Public Accountant licensed to practice in Florida. As part of my services I, sometimes, complete [except for signature] my clients' annual reports and mail them. My client has always relied on me to do this and that is exactly what was done this year. Unfortunately because of my health the annual report was not filed in time.

I suffer from debilitating back pain which was recently diagnosed as "Degenerative Disc Disease". The discs located in the lumbar portion of my back tend to herniate and cause me pain that sometimes renders me unable to work for weeks. I am, starting in 2002, advising my clients that they need to take steps to do deadline sensitive filings on their own.

I am asking you to, please, abate any penalties charged to my clients which have been loyal enough to allow me to continue as their accountant.

The following is my physician information for verification purposes:

Neurosurgeons: Enrique Forte, MD., retired. Mercy Hospital. Performed surgery first time disk ruptured.
305-854-9292

Sergio Gonzalez-Arias, MD. Baptist Hospital. Will eventually perform surgery.
8950 SW 88th Street
305-271-6159

Cesar Guerrero, MD. Mercy Hospital. Second Opinion.
3661 South Miami Avenue
305-856-9517