## 2000 UNIFORM BUSINESS REPORT (UBR) FILED May 05, 2000 8:00 am **DOCUMENT # H31558** 1. Entity Name Secretary of State NOZZLETECH, INC. 05-05-2000 90019 041 \*\*\*150.00 Mailing Address Principal Place of Business 3208 E COLONIAL DR 3208 E COLONIAL DR #C-304 ORLANDO FL 32803 ORLANDO FL 32803-5121 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4.1 FEI Number City & State City & State 59-2475339 Not Applicable \$8.75 Additional Country Zip Country Zip Certificate of Status Desired Fee Required 7.! Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name COCKS, ERIC H Street Address (P.O. Box Number is Not Acceptable) 4100 GALT OCEAN DR #712 FT LAUDERDALE FL 33308 Zip Code City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Change ☐ Addition TITLE □ Delete TITLE COCKS, ERIC H NAME NAME 4100 GALT OCEAN DR #712 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33308 ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE TITLE ☐ Addition ☐ Delete TITLE ERIC J COCKS, ERIC J NAME NAME 409 LINCOLN-BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SANTA MONICA CA 90402 GRIFFIN RICHARD TITI F TITLE 5320 NW 35TH AVE NAME NAME LAUDGADALE FL 33309 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS 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

GRIC H COCKS PRES 4/25/00 407-839-1500

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: