2001-UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 03, 2001 8:00 am **DOCUMENT # H60377** Secretary of State UNI-TECH, GULF COAST, INC. 05-03-2001 90082 045 ***150.00 Principal Place of Business Mailing Address 4002 19TH AVE WEST (34205) 4002 19TH AVE WEST (34205) PO BOX 7292 PO BOX 7292 **BRADENTON FL 34210 BRADENTON FL 34210** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE-IN THIS SPACE City & State City & State 4. FEI Number 65-0021374 Applied For Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JESSICA JAE ZEIGLER LA ROSA, DENNIS Street Address (P.O. Box Number is Not Acceptable) 106 E. College Ave., Suite 1200 1901 WELBY WAY TALLAHASSEE FL 32308 32361 Tallahassee 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. JESSICA JAE ZEIGLER, Director ure, typed or printed name of registered agent and title if applicable. (NOTE: Reg FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 11. CR2E034 (10/00) ☐ Delete TITLE TITLE FERRERI, PATRICIA NAME NAME STREET ADDRESS 4002 19TH AVE WEST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** DP ☐ Delete TITLE ☐ Change ☐ Addition TITLE FERRERI, SALVATOR NAME NAME 4002 19TH AVE WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRADENTON FL** CITY-ST-ZIP ☐ Delete TITLE -Change ☐ Addition TITLE FERRERI, JESSICA JAE NAME NAME ZEIGLER, JESSICA JAE 2622 Stoneridge Drive STREET ADDRESS 5627 B LUMBERJACK LANE STREET ADDRESS CITY-ST-ZIP TALLAHASSEE FL 32303 CITY-ST-ZIP Tallahassee, Fl. 32303 ☐ Delete TITLE ☐ Change X Addition ۷P NAME NAME OhNeill, Joseph STREET ADDRESS STREET ADDRESS 408 64th Street Ct. NW CITY-ST-7IP CITY-ST-ZIP Bradenton, Florida 34209 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP ☐ Delete TITLE ☐ Addition TITLE ☐ Change 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 changed, or on an attachment with an address, with all other like empowered.

essele Patricia Ann Ferreri

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED