

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 22, 2002 8:00 am**  
**Secretary of State**

07-22-2002 90162 013 \*\*\*150.00

**DOCUMENT # H66274**

1. Entity Name  
**UTC INDUSTRIES, INC.**

Principal Place of Business

P.O. BOX 380579  
 MIAMI FL 33138

Mailing Address

P.O. BOX 380579  
 MIAMI FL 33138

00150038



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2562035**

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

**UFFNER, STUART P**  
**1050 N.E. 202 TERRACE**  
**MIAMI FL 33179**

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 **STUART P. UFFNER**

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 **P** ☐ Delete  
 NAME **UFFNER, STUART P**  
 STREET ADDRESS **1050 N.E. 202 TERRACE**  
 CITY-ST-ZIP **MIAMI FL 33179**

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

TITLE **VP-** ☐ Delete  
 NAME **UFFNER, JUDITH**  
 STREET ADDRESS **5660 COLLINS AVENUE**  
 CITY-ST-ZIP **MIAMI BEACH FL 33140**

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
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TITLE ☐ Change ☐ Addition  
 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: **STUART P. UFFNER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/16/02**

Date

**305-944-9001**

Daytime Phone #

CR2E034 (4/02)

Attachment Jr. # H66274  
UTC INDUSTRIES  
P.O. BOX 380579  
MIAMI, FLORIDA 33138

July 16, 2002

Florida Department of State  
Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500  
ATT. Madeline

RE: H66274

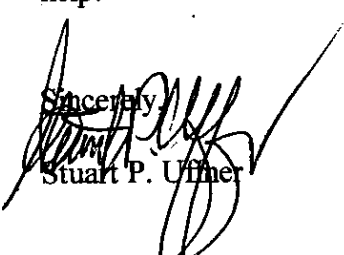
Madeline,

Per our conversation last week, please accept this letter as an explanation for waiving late fees on our corporate Uniform Business Report.

As I mentioned in our phone conversation, I never received the renewal notice in December as we should have. Enclosed, is the renewal notice along with our company check for payment. I appreciate you offering us this courtesy.

If you need to contact us, please call at 305-944-9001. Thank you very much for your help!

Sincerely,

  
Stuart P. Uffner