## **2000 UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # H94541 May 16, 2000 8:00 am Secretary of State 1. Entity Name APPLIED OZONE TECHNOLOGIES, INC. 05-16-2000 90086 032 \*\*\*150.00 Principal Place of Business Mailing Address 2331 63RD AVENUE EAST 2331 63RD AVENUE EAST **BRADENTON FL 34203 BRADENTON FL 34203-5016** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2627190 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WILSON, TONEY H. Street Address (P.O. Box Number is Not Acceptable) 295 SINCLAIR DRIVE SARASOTA FL 34240 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS CEOD · ☐ Change Addition ☐ Delete TITLE TITLE MURPHY: ROBET J. NAME NAME 1441 JUMANA LOOP STREET ADDRESS STREET ADDRESS APOLLO BEACH FL CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE MORGAN, H.H. JR. NAME NAME 1882 BRIAR CREEK PL STREET ADDRESS STREET ADDRESS SARASOTA FL CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ■ Addition TITLE WILSON, TONEY H NAME 295 SINCLAIR DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-78 SARASOTA FL CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete FOXWORTHY, H.R. NAME NAME 2180 CORNELL ST STREET ADDRESS STREET ADDRESS SARASOTA FL CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE WARRINGTON, H. MONROE NAME NAME 5800 CLARK RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP ☐ Delete ☐ Change TITLE ☐ Addition TITLE COPLAND, ROBVERT NAME NAME 4611 WINDSOR PK. STREET ADDRESS STREET ADDRESS SARASOTA FL CITY-ST-ZIP CITY-ST-ZIP

3. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-753-355.