

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # H94541**

1. Entity Name

APPLIED OZONE TECHNOLOGIES, INC.**FILED****May 14, 2001 8:00 am**
Secretary of State

05-14-2001 90064 007 ***158.75

Principal Place of Business

2331 63RD AVENUE EAST
#R
BRADENTON FL 34203
US

Mailing Address

2331 63RD AVENUE EAST
#R
BRADENTON FL 34203
US

2. Principal Place of Business

333 Falkenburg Rd.

3. Mailing Address

333 Falkenburg Rd.

Suite, Apt. #, etc.

C-306

Suite, Apt. #, etc.

C-306

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33619

Country

Hillsborough

Zip

33619

Country

Hillsborough

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2627190

Applied For

Not Applicable

5. Certificate of Status Desired

XX**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**WILSON, TONEY H.
295 SINCLAIR DRIVE
SARASOTA FL 34240**

7. Name and Address of New Registered Agent

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CEO
MURPHY, ROBERT J.
1441 JUMANA LOOP
APOLLO BEACH FL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MORGAN, H.H. JR.
1882 BRIAR CREEK PL
SARASOTA FL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WILSON, TONEY H.
295 SINCLAIR DRIVE
SARASOTA FL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FOXWORTHY, H.R.
2180 CORNELL ST
SARASOTA FL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WARRINGTON, H. MONROE
5800 CLARK RD
SARASOTA FL** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
COPLAND, ROBERT
4611 WINDSOR PK.
SARASOTA FL** ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)