

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L03000056238

1. Entity Name  
UNIVTECH, LLC



Principal Place of Business  
1350 E NEWPORT CENTER DR, STE 206  
DEERFIELD BEACH, FL 33442

Mailing Address  
1350 E NEWPORT CENTER DR, STE 206  
DEERFIELD BEACH, FL 33442

**DO NOT WRITE IN THIS SPACE**



03142005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
20-0514567

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

KAY LAW OFFICES  
ATTN: JAMES R. KAY, ESQ  
700 VILLAGE SQUARE CROSSING, STE 102B  
PALM BEACH GARDENS, FL 33410

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR REIBLING, LORENZ 118 MILK ST BOSTON, MA 02109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR REIBLING, GUENTHER 1350 E NEWPORT CENTER DR, STE 206 DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MERRIGAN, PETER 118 MILK ST BOSTON, MA 02109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KASSOF, LINDA 1350 E NEWPORT CENTER DR, STE 206 DEERFIELD BEACH, FL 33442
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000333173  
04/26/05-80086-018 55.00

**DO NOT WRITE  
IN THIS SPACE**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Linda Kassof 04/22/2005 (954) 428-4585