2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

L84966 **DOCUMENT #**

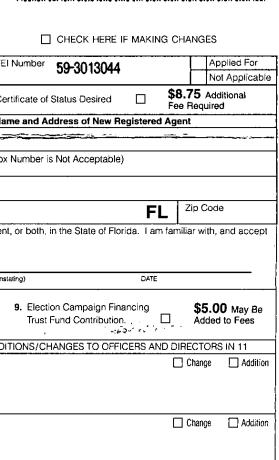
1. Entity Name GARTEK TECHNOLOGIES, INC.



Mailing Address 8402 ANNWOOD ROAD Principal Place of Business 8402 ANNWOOD ROAD LARGO FL 33777 LARGO FL 33777 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 59-3013044 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GLITTLEMAN, NEAL Street Address (P.O. Box Number is Not Acceptable) 8402 ANNWOOD ROAD **LARGO FL 33777** City Zin 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Change ☐ Addition Delete GITTLEMAN, NEAL NAME NAME 8402 ANNWOOD ROAD STREET ADDRESS STREET ADDRESS **LARGO FL 33777** CITY-ST-ZIP CITY-ST-ZIP TSD ☐ Addition TITLE ☐ Delete TITLE ☐ Chance **GRIMES, PAUL** NAME NAME 8402 ANNWOOD ROAD STREET ADDRESS STREET ADDRESS **LARGO FL 33777** CITY-ST-ZIP CITY-ST-ZIP TITLE ~ 🖃 Delete TITLE-- - Change - - Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete [] Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

FILED Jan 23, 2003 8:00 am Secretary of State

01-23-2003 90083 029 ***150.00



12. 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 embowered to eport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7/P