

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90015 035 ***150.00

0127329

DOCUMENT # M28965

1. Entity Name

POWER VENT TECHNOLOGIES, INC.

Principal Place of Business

2615 NE 5TH AVE
POMPANO BEACH FL 33064
US

Mailing Address

2615 NE 5TH AVE
~~17 ROSE DRIVE~~
POMPANO BEACH FL 33064
US

907796



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

2615 N.E. 5th Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Pompano Beach, FL

4. FEI Number 59-2654926

Applied For

Not Applicable

Zip

Country

Zip

33064

Country

USA

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

SMALL, MARK

~~5067 GARFIELD RD.~~

~~DELRAY BEACH FL 33484~~

Name

Mark Small

Street Address (P.O. Box Number is Not Acceptable)

2615 NE 5th Avenue

City

Pompano Beach

FL

Zip Code

33064

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 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 PD
NAME SMALL, MARK
STREET ADDRESS 5067 GARFIELD ROAD
CITY-ST-ZIP DELRAY BEACH FL 33484 ☐ Delete

TITLE Secretary/Treasurer
NAME Peter Lindgren
STREET ADDRESS 2615 NE 5th Ave.
CITY-ST-ZIP Pompano Beach, FL 33064 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE CEO
NAME David Gruenwald
STREET ADDRESS 2615 NE 5th Ave.
CITY-ST-ZIP Pompano Beach, FL 33064 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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

1/22/01

Date

954-943-4243

Daytime Phone #

CR2E034 (10/00)