

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2002 8:00 am
Secretary of State

01-31-2002 90018 046 ***150.00

DOCUMENT # P00000041983

1. Entity Name
SEA TECH ELECTRIC, INC.

Principal Place of Business

127 INDUSTRIAL RD., STE. B
PINE KEY FL 33043

Mailing Address

P.O. BOX 420529
SUMMERLAND KEY FL 33042-0529

2. Principal Place of Business

3. Mailing Address

P.O. Box 420842

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Summerland Key FL

Zip

Country

Zip

33042

Country

4. FEI Number

65-1002546

Applied For

Not Applicable

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

MARSH, BRYAN
2373 PENSACOLA RD
BIG PINE KEY FL 33043

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, 2002 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 **D** ☐ Delete
NAME **MARSH, BRYAN**
STREET ADDRESS **2373 PENSACOLA RD**
CITY-ST-ZIP **BIG PINE KEY FL 33043**

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

TITLE **D** ☒ Delete
NAME **SZMANSKY, LES L**
STREET ADDRESS **27360 BARBADOS LN**
CITY-ST-ZIP **SUMMERLAND KEY FL 33042**

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

TITLE **ST** ☒ Delete
NAME **SZMANSKY, ROBIN**
STREET ADDRESS **27360 BARBADOS LN**
CITY-ST-ZIP **SUMMERLAND KEY FL 33042**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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

BRYAN MARSH

01/11/02

Date

(305) 292 0354

Daytime Phone #

CR2E034 (9/01)