

FILED
Aug 11, 2003 8:00 am
Secretary of State

08-11-2003 90290 007 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # PO0000046472 (4)

1. Entity Name

Duncan Technologies & Transportation



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3439 Longleaf Road

Suite, Apt. #, etc.

3. Mailing Address

1515 Ridgewood Ave

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ormond Beach FL

City & State

Holly Hill FL

4. FEL Number

59-3645108

Applied For

Not Applicable

Zip

32174

Country

USA

Zip

32117

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Joe Raguidice, CPA

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

1515 Ridgewood Ave

City

Holly Hill

FL

Zip Code

32117

**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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

(D)
Duncan William
3439 Longleaf Road
Ormond Beach FL 32174

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/22/03

Date

Daytime Phone #

(386) 304-1000

CR2E034B (12/02)

Attachment# 86137744
P00000046472

Division of Corporations

P. O. Box 1500

Tallahassee, Florida 32302-1500

July 22, 2003

Dear Sir or Madam:

This letter is to inform your office that I never received my UBR form to file it for 2003. Last year we asked the dep of state to change our mailing address and to up date your records, this did not happen. I mostly work out of the country and have my mail going to my account at the address we requested to have all mail change to. I called the Dep of state and they advised me to download a blank form. Your office also advised me to send a letter stating I did not receive my form and give the correct mailing address so the form can get to me on time next year. Your office said all penalties would be waived. Thank you for your time in concerning this matter.

Sincerely,

DUNCAN TECHNOLOGIES & TRANSPORTATION, INC
CARE OF JOE LOGUIDICE, CPA
1515 RIDGEWOOD AVENUE
HOLLY HILL, FL 32117