**FILED** 

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Jul 17, 2001 8:00 am P00000056688 DOCUMENT # **Secretary of State** 1. Entity Name 07-17-2001 90001 004 \*\*\*150.00 E-BIZ TECHNOLOGY, INC. Principal Place of Business Mailing Address 1930 GARWOOD DRIVE 1930 GARWOOD DRIVE ORLANDO FL 32822 ORLANDO FL 32822 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE -Suite, Apt.,#, etc. \_ - \_ · Suite, Apt. #, etc. Applied For --4. FEI Number City & State City & State 59-3652301 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE **CORAL GABLES FL 33134** 4 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 /50.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be. After September 12, 2001 Fee will be \$750:00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition **PSTD** ☐ Delete TITLE TITLE NAME PITTS, SHERRY L NAME 1930 GARWOOD DRIVE STREET ADDRESS STREET ADDRESS ORLANDO FL 32822 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITI F ☐ Delete TITLE NAME PITTS, JOSEPH J NAME STREET ADDRESS 1930 GARWOOD DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32822 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Defete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

**SIGNATURE:** 

changed, or on an attachment with an address, with all

Attachment ANT491

Department of State,

I am a new business and I checked all my documents and mail. I never did receive a first notice to pay the 150.00. I have kept all documents and letters that have come in and this never did. Please accept the 150.00 fee. I will make sure that I put this on my calendar for next year just in case of the letter not making it to me again. Thank you,

Joseph Pitts VP E-Biz Technology Inc. 407 384 1406

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