

2001 UNIFORM BUSINESS REPORT (UBR)

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FILED
Jun 05, 2001 8:00 am
Secretary of State
 05-14-2001 90041 010 ***150.00

DOCUMENT # P00000068023
 1. Entity Name
TITLE - TECH NETWORKS, INC.

Principal Place of Business Mailing Address
 336 SW 96TH CT 336 SW 96TH CT
 MIAMI FL 33174 MIAMI FL 33174



2. Principal Place of Business 3. Mailing Address
3105 W. Waters Ave **Sams.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
208

DO NOT WRITE IN THIS SPACE
65-1025080
 4. FFL Number Applied For
770455-2364 Not Applicable

City & State City & State
Tampa, FL
 Zip Country
33614 USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
ROJAS, CARLOS M
1790 W 49TH ST, #315
HALEAH FL 33012

7. Name and Address of New Registered Agent
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	
TITLE	D <input type="checkbox"/> Delete
NAME	MACIAS, DEBORAH ANA
STREET ADDRESS	336 SW 96TH CT 3105 W. Waters Ave
CITY-ST-ZIP	MIAMI FL 33174 # 208 Tampa, FL 33614
TITLE	D <input type="checkbox"/> Delete
NAME	MACIAS, OSVALDO
STREET ADDRESS	336 SW 96TH CT 3105 W. Waters Ave
CITY-ST-ZIP	MIAMI FL 33174 # 208 Tampa, FL 33614
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Burks, Paul E.
STREET ADDRESS	3105 W. Waters Ave # 208
CITY-ST-ZIP	Tampa, FL 33614
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 authority.

SIGNATURE: Osvaldo Macias Date: 4-27-01 Daytime Phone #: (813) 920-0351

CR2E034 (10/00)