

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000070168

1. Entity Name

CENTURY TECHNOLOGIES GROUP, CORP.

FILED
Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90328 026 ***150.00

Principal Place of Business

516 NW 57TH AVENUE SUITE 201
MIAMI FL 33126

Mailing Address

516 NW 57TH AVENUE SUITE 201
MIAMI FL 33126

2. Principal Place of Business

2550 NW 72nd Ave

Suite, Apt. #, etc.

Ste # 313

City & State

Miami Florida

Zip

33122

Country

USA

3. Mailing Address

2550 NW 72nd Ave

Suite, Apt. #, etc.

Ste # 313

City & State

Miami, Florida

Zip

33122

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1028709

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

MORENO, JULIO J
516 NW 57TH AVENUE SUITE 201
MIAMI FL 33126

7. Name and Address of New Registered Agent

Name

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

2550 NW 72nd Avenue Ste # 313

City

Miami

FL

Zip Code

33122

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

TITLE ☐ Delete
NAME MORENO, JULIO J
STREET ADDRESS 516 NW 57TH AVENUE SUITE 201
CITY-ST-ZIP MIAMI FL 33126

TITLE ☐ Delete
NAME VSD
STREET ADDRESS FIGUEROA, ARAMIS
CITY-ST-ZIP 516 NW 57TH AVENUE SUITE 201
MIAMI FL 33126

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE ☐ Change ☐ Addition
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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

04/18/01 (205) 474-3043
Date Daytime Phone #

CR2E034 (10/00)