

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90789 019 ***150.00

DOCUMENT # P00000072914

1. Entity Name
APPLIED MECHANICAL TECHNOLOGIES, INC.



Principal Place of Business
**10664 NW FONTAINEBLEAU BLVD.
MIAMI FL 33172**

Mailing Address
**10664 NW FONTAINEBLEAU BLVD.
MIAMI FL 33172**

2. Principal Place of Business
521 S.W. 88 PL.W.

3. Mailing Address
521 S.W. 88 PL.W.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MIAMI, FLORIDA

City & State
MIAMI, FLORIDA

Zip
33174

Country
DADE

Zip
33174

Country
DADE

4. FEI Number
65-1034529

Applied For
☐ Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**BORATZUK, ROSTISLAW
10664 NW FONTAINEBLEAU BLVD
MIAMI FL 33172**

7. Name and Address of New Registered Agent

Name
BORATZUK, ROSTISLAW
Street Address (P.O. Box Number is Not Acceptable)
521 S.W. 88 PL.W.
City
MIAMI FL Zip Code
33174

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

4-11-03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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
PD ☐ Delete
NAME
BORATZUK, ROSTISLAW
STREET ADDRESS
10664 NW FONTAINEBLEAU BLVD.
CITY-ST-ZIP
MIAMI FL 33172

TITLE
VD ☐ Delete
NAME
BORATZUK, PATRICIA
STREET ADDRESS
10664 NW FONTAINEBLEAU BLVD.
CITY-ST-ZIP
MIAMI FL 33172

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
PD ☒ Change ☐ Addition
NAME
BORATZUK, ROSTISLAW
STREET ADDRESS
521 S.W. 88 PL.W.
CITY-ST-ZIP
MIAMI, FL 33174

TITLE
VD ☒ Change ☐ Addition
NAME
BORATZUK, ROSTISLAW
STREET ADDRESS
521 S.W. 88 PL.W.
CITY-ST-ZIP
MIAMI, FL 33174

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

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

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

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

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-11-03

CR2E034 (10/02)