FILED
Jul 02, 2001 8:00 am
Secretary of State
05-23-2001 91188 005 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000080835

1. Entity Name
OscarTech, Inc

Principal Place of Business: 6113 SW 127 Place, Miami, FL 33183-1351

Mailing Address:

[redacted] 9386

2. Principal Place of Business: 6113 SW 127 Place
Suite, Apt. #, etc.:
3. Mailing Address:
Suite, Apt. #, etc.:

DO NOT WRITE IN THIS SPACE

City & State: Miami, FL
Zip: 33183 Country: Miami-Dade
City & State:
Zip:
Country:

4. FEI Number: 65-1031628 Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent
Wanming Zang
6113 SW 127 Place
Miami, FL 33183-1351

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when a filing) Date

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

[redacted]

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

Title / Name / Street Address / City-St-Zip	Delete
(PD) President Wanming Zang 6113 SW 127 Place Miami, FL 33183-1351	☐
	☐
	☐
	☐
	☐
	☐
	☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Title / Name / Street Address / City-St-ZIP	Change / Addition
	☐ ☐
	☐ ☐
	☐ ☐
	☐ ☐
	☐ ☐
	☐ ☐
	☐ ☐

CPDES34 (11/00)

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: X [signature] X 6/14/01 305-913-8600x3009 305-388-8586
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #