## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 12, 2002 8:00 am Secretary of State P00000114358 DOCUMENT # 1. Entity Name 05-12-2002 90619 045 \*\*\*150.00 SPEEDGEARS INC. Mailing Address Principal Place of Business 2211 SW 31 AVENUE 2211 SW 31 AVENUE HALLANDALE FL 33009 HALLANDALE FL 33009 2. Principal Place of Business 3. Mailing Address 2211 SW 31st Ave 2211 SW 31st Ave Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-1062643 Not Applicable Pembroke Park, Pembroke Park, FL Country Country \$8.75 Additional 5. Certificate of Status Desired 33009 USA 33009 USA Fee Required = 7.-Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FLAMM, BRUCE CPA Street Address (P.O. Box Number is Not Acceptable) 9400 S DADELAND BLVD SUITE 110 MIAMI.FL 33156 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (9/01) ☐ Addition ☐ Change ☐ Delete TITLE TITLE TAN, STEFANUS R NAME NAME 2211 SW 31 AVENUE STREET ADDRESS STREET ADDRESS HALLANDALE FL 33009 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE WEISSMARK, BENJAMIN NAME NAME 2620 SO UNIVERSITY DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAVIE FL 33328 CITY-ST-7IP Change ☐ 'Addition TITLE TITLE ☐ Delete NAME NAME TAN, CHRISTINA J STREET ADDRESS 424 POINCIANA DR STREET ADDRESS CITY-ST-ZIE HALLANDALE FL 33309 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

**SIGNATURE:** 

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

REONJOYCEDTan, Treasurer TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13. Thereby 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

> 954-986-9869 04/23/02

**FILED**