

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90017 048 ***150.00

DOCUMENT # P00000116211

1. Entity Name

B. & V. TECHNOLOGIES, INC.

Principal Place of Business

309 3RD WAY
WEST PALM BEACH FL 33407

Mailing Address

309 3RD WAY
WEST PALM BEACH FL 33407



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3171 El Camino Real
 Suite, Apt. #, etc.

3. Mailing Address

3171 El Camino Real
 Suite, Apt. #, etc.

City & State

W.P.B., FL

City & State

WPB, FL

Zip

33409

Country

Palm Beach (USA)

Zip

33419

Country

Palm Beach (USA)

4. FEI Number

65-1070275

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

N/A

6. Name and Address of Current Registered Agent

VIRGO, BRETT

309 3RD WAY

WEST PALM BEACH FL 33407

3171 El Camino Real
WPB, FL 33409

7. Name and Address of New Registered Agent

Name

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

N/A

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

Brett Virgo
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

02/20/02

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, 2002 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

N/A

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **VIRGO, BRETT**
 STREET ADDRESS **309 3RD WAY**
 CITY-ST-ZIP **WEST PALM BEACH FL 33407**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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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
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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:

Brett Virgo
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/20/02

501-300-6776

Date

Daytime Phone #

CR2E034 (9/01)