

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # 701000035919

02 JUN 17 AM 9:25

1. Entity Name
Med-Tech Business Solutions, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3311 Wilkshire Ln
Suite, Apt. #, etc.

3. Mailing Address
PO Box 3457
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Jacksonville FL
Zip Country
FL USA

City & State
Ponte Vedra Bch FL
Zip Country
32004 USA

4. FEI Number
593710583
Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name Kellie Giordano
Street Address (P.O. Box Number is Not Acceptable)
3311 Wilkshire Ln
City Jacksonville FL Zip Code 32257

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 Kellie Giordano Kellie Giordano 6/7/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)
 January 1 - May 1 Fee is \$150.00
 After May 1, Fee is \$550.00
 Amended UBR is \$61.25
 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 NAME STREET ADDRESS CITY-ST-ZIP	<u>President Kellie Giordano 3311 Wilkshire Ln Jacksonville FL 32257</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>[REDACTED]</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Vice President Frank Giordano 3311 Wilkshire Ln Jacksonville FL 32257</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>500006036755-9</u> <u>-06/26/02--01024--012</u> <u>****150.00 ****150.00</u>
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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)(f), 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 on an attachment with an address with all other title empowered.

SIGNATURE Kellie Giordano Kellie Giordano 6/7/02 (904)48-9988
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

Attachment

**Med-Tech Business
Solutions, Inc.**

3311 Wilkshire Ln Jacksonville FL 32257

#

June 7, 2002

Division of Corporations
P O Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

I called the division of Corporations office in Tallahassee today and spoke with Esther. During the course of our conversation I revealed that I was unaware of all of the necessary steps to maintaining my Articles of Incorporation including the Uniform Business Report. At that time Esther advised me to file the report, which is attached, and include a check for the \$150.00 filing fee. She advised that this has been known to happen especially in the first business year of small businesses.

Enclosed please find a check for the \$150.00 filing fee and the Uniform Business Report. If there is anything additional required please contact me either by mail at the above address or by telephone at (904) 448-9988.

Sincerely,



Kellie Giordano
President

cc: file
Enclosures