

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90122 004 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

10063397

DOCUMENT # P01000041429			
1. Entity Name STRATEGIC BUSINESS TECHNOLOGY, INC.			
Principal Place of Business 10910 SW 25 ST MIAMI, FL 33165		Mailing Address 10910 SW 25 ST MIAMI, FL 33165	
2. Principal Place of Business		3. Mailing Address 7715 NW 48 ST	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 310	
City & State		City & State MIAMI FL	
Zip	Country	Zip	Country
33166	USA	33166	USA
4. FEI Number 65-1097656		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BAYLAC, JULIO 10910 SW 25 ST MIAMI, FL 33165		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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Julio Baylac</i></u> JULIO BAYLAC DATE 4/7/03 (NOTE: Registered Agent's signature required when registering)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$650.00 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAYLAC, JULIO 871 GARNET CR FORT LAUDERDALE, FL 33326	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUSTAVO, SCHWEITZER 2961 CENTERGATE DR HOLLYWOOD, FL 33025	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: <u><i>Julio Baylac</i></u> JULIO BAYLAC		DATE: 4/7/03 305/599-2627	