

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90119 024 ***150.00

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1. Entity Name
PROGRESSIVE TECHNOLOGY MANAGEMENT, INC.



Principal Place of Business
7758 N.W. 46 STREET
MIAMI FL 33166

Mailing Address
7621 S.W. 175 STREET
MIAMI FL 33157

2. Principal Place of Business

3. Mailing Address

7758 NW 46th ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
MIAMI, FL

4. FEI Number **65-1099453**

Applied For
Not Applicable

Zip

Country

Zip

Country

33166

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AZPURUA, ALEJANDRO A
7621 S.W. 175 STREET
MIAMI FL 33157

Name

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

City

MIAMI

FL

Zip Code

33166

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

ALAN AZPURUA

4-15-2003

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 **PD**
NAME **AZPURUA, ALEHANDRO A**
STREET ADDRESS **8217 N.W. 30TH TERRACE**
CITY-ST-ZIP **MIAMI FL 33122**

TITLE **PD**
NAME **AZPURUA, ALAN**
STREET ADDRESS **7758 N.W. 46th STREET**
CITY-ST-ZIP **MIAMI, FL 33166**

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALAN AZPURUA / 4-15-2003 / 305-715-9717

Date

Daytime Phone #

CR2E034 (10/02)