

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2002 8:00 am
Secretary of State

07-10-2002 90196 043 ***150.00

DOCUMENT # P01000044817

1. Entity Name
NKT COMPUTER CORPORATION

Principal Place of Business

**1112 MARYLAND AVENUE
 SAINT CLOUD FL 34769**

Mailing Address

**1112 MARYLAND AVENUE
 SAINT CLOUD FL 34769**

2. Principal Place of Business

1112 MARYLAND AVENUE

Suite, Apt. #, etc.

3. Mailing Address

1112 MARYLAND AVENUE

Suite, Apt. #, etc.

City & State

SAINT CLOUD, FL

Zip

34769

Country

OSCEOLA

City & State

SAINT CLOUD, FL

Zip

34769

Country

OSCEOLA

4. FEI Number

59-3721075

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GREEN, CHRISTINE B
 1112 MARYLAND AVENUE
 SAINT CLOUD FL 34769**

7. Name and Address of New Registered Agent

Name

GREEN, CHRISTINE B

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

1112 MARYLAND AVENUE

City

SAINT CLOUD

FL

Zip Code

34769

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **CEO** ☒ Delete
 NAME **GREEN, PHILLIP A**
 STREET ADDRESS **1112 MARYLAND AVENUE**
 CITY-ST-ZIP **SAINT CLOUD FL 34769**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CTO** ☒ Change ☐ Addition
 NAME **GREEN, Phillip A**
 STREET ADDRESS **1112 MARYLAND AVENUE**
 CITY-ST-ZIP **SAINT CLOUD, FL 34769**

TITLE **President** ☒ Change ☒ Addition
 NAME **GREEN, CHRISTINE B**
 STREET ADDRESS **1112 MARYLAND AVENUE**
 CITY-ST-ZIP **SAINT CLOUD, FL 34769**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: **CHRISTINE B GREEN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/2002

Date

407-538-4483

Daytime Phone #

CR2E034 (4/02)

B0128457

NKT Computer Corp., Inc.

1112 Maryland Ave.
St. Cloud, Florida 34769
407-538-4483

Attachments

July 8, 2002

#PO1600044817

To Whom It May Concern:

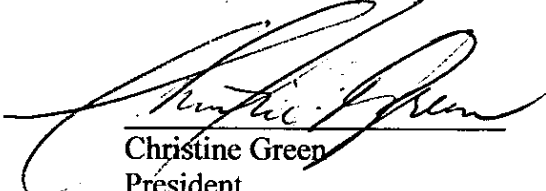
Please excuse the tardiness of the UBR payment. I did not received the prior
notice.

Enclosed please find a check in the amount of \$150.00 for the UBR payment.

Please accept the payment with my apologies.

If you have any questions please do not hesitate to call me at the above mentioned
phone number.

Thank you,


Christine Green
President