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

DOCUMENT # P0/00054019

TECIMAGING SYSTEMS, INC.





03 MAY -7 AM 4:52

SECRETARY OF STATE

	DO N	OT WRITE	IN THIS SE	IALLAMASSEE, MUUMIDA				
2. Principal Place of Business 238 Palermo Avenue			3. Mailing Address % wolfson Farkas & Garvey					_
Suite, Apt.		100.100	Suite, Apt. #, etc. 104-18 metropolitan Ave			2002 NOT WRO (1) 2	3 VBI	3
Coral Gables F1.			Forest Hills MY			4. FEI Number 65-1109358	Applied For Not Applicable	
<u>3</u> 3].	34_	Country Zip 37.5			5A	5. Certificate of Status Desired \$8.75 Additional Fee Required		
					7. Name and Address of Current Registered Agent Name Name Name Name			
ر دول کار کار کار	100	O NOT W		Stre	et Address (P.O. Box Number is Not Acceptable)		
		I THIS SE	ACE		a38 Palermo Avenue			
				City	Cor	ral Gables FL	Zip Code 33134	
	inamed entity lions of registe		r the purpose of changing its r	egistered offic	e or register	red agent, or both, in the State of Florida, I am fami	liar with, and accept	
SIGNATURE	Signature, lyped o	r printed name of registered agent	and hits if amplicable. (NOTE:	Registered Agent s	ionature required	t when reinstating) , DATE		
January 1. May 1. Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25					 _	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
Make Check	Florida Department of OFFICERS AND	Sec. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19	Pisastopija (SCP) k	Jagotago kyyri. Pisac				
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12. I hereby certify that the information supplied with this filling 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 trusfee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

646-2352011

WOLFSON, FARKAS & GARVEY, P.C. ATTORNEYS AT LAW

104-18 METROPOLITAN AVENUE FOREST HILLS, NEW YORK 11375-6736

JEFFREY A. FARKAS, ESQ.
LAWRENCE I. WOLFSON, OF COUNSEL
JOHN P. GARVEY, OF COUNSEL

TEL: (718) 459-8080 FAX: (718) 268-3739

May 5, 2003

Florida Dept of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

RE: TEC IMAGING SYSTEMS, INC.

Ref. Number: P01000054019

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HUG REALTY INC.

Ref. Number: P01000079893

I am writing with regard to the enclosed UBR forms which had been returned due to the need for reinstatement of the above entities. Having spoken to someone in your office, I am resubmitting these documents along with the fee of \$308.75 for each (2 checks) representing 2 years filing and a Certificate of Status for each.

Non-filing of this report had been completely inadvertent on the part of the entities. The address used at incorporation was a temporary location. In fact the entities had relocated two times in the first year of operation until finally securing and settling into their now permanent (new) location. They never received the initial renewal forms or any subsequent notices that may have been sent by the state to the last known address.

Please therefore process the enclosed UBR's accepting the fees therewith and return the requested certificates at your earliest convenience. I have enclosed a post paid return envelope to facilitate the matter. Thank you for you assistance.

Very truly yours,

Jeffrey A. Farkas, Esq.

JAF;jm