

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2003 8:00 am**  
**Secretary of State**

04-23-2003 90261 032 \*\*\*150.00

**DOCUMENT # P01000073448**

**1. Entity Name**  
**AMERICAN SUN-TECH TELECOMMUNICATIONS, INC.**



**Principal Place of Business**  
**7928 JUNIPER ST**  
**MIRAMAR FL 33023**

**Mailing Address**  
**7928 JUNIPER ST**  
**MIRAMAR FL 33023**

**2. Principal Place of Business**

**6750 Arbor Dr #101**

**3. Mailing Address**

**6750 Arbor Dr.**

**Suite, Apt. #, etc.**

**# 101**

**Suite, Apt. #, etc.**

**# 101**

**City & State**

**Miramar FL**

**City & State**

**Miramar FL**

**Zip**

**33023**

**Country**

**USA**

**Zip**

**33023**

**Country**

**USA**



☒ **CHECK HERE IF MAKING CHANGES**

**4. FEI Number** **65-1122305**

**Applied For**

**Not Applicable**

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

**6. Name and Address of Current Registered Agent**

**RODRIGUEZ, ROBERTO**  
**7928 JUNIPER ST**  
**MIRAMAR FL 33023**

**7. Name and Address of New Registered Agent**

**Name** **Lucila Ramirez**

**Street Address (P.O. Box Number is Not Acceptable)**  
**6750 Arbor Dr. #101**

**City** **Miramar**

**FL**

**Zip Code** **33023**

**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**

**4-14-03**

**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** ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

**TITLE** **P** ☐ **Delete**  
**NAME** **RODRIGUEZ, ROBERTO**  
**STREET ADDRESS** **7928 JUNIPER ST**  
**CITY-ST-ZIP** **MIRAMAR FL 33023**

**TITLE** **S** ☐ **Delete**  
**NAME** **RAMIREZ, LUCILA M**  
**STREET ADDRESS** **7928 JUNIPER ST**  
**CITY-ST-ZIP** **MIRAMAR FL 33023**

**TITLE** **V** ☐ **Delete**  
**NAME** **MERCEDES, EURIS F**  
**STREET ADDRESS** **7928 JUNIPER ST**  
**CITY-ST-ZIP** **MIRAMAR FL 33023**

**TITLE** ☐ **Delete**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ **Delete**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ **Delete**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **Vice President** ☒ **Change** ☐ **Addition**  
**NAME** **Roberto Rodriguez**  
**STREET ADDRESS** **7928 Juniper St.**  
**CITY-ST-ZIP** **Miramar FL 33023**

**TITLE** **President/Secretary** ☒ **Change** ☐ **Addition**  
**NAME** **Lucila Ramirez**  
**STREET ADDRESS** **6750 Arbor Dr #101**  
**CITY-ST-ZIP** **Miramar FL 33023**

**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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**CITY-ST-ZIP**

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

**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*

**4-14-03**

**954-981-6002**

**Date**

**Daytime Phone #**

CR2E034 (10/02)