## 2002 UNIFORM BUSINESS REPORT (UBR)

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**SIGNATURE** 

## FILED May 19, 2002 8:00 am Secretary of State P01000078875 DOCUMENT # 1. Entity Name 05-19-2002 90246 043 \*\*\*150.00 INTITECH, CORP. Mailing Address Principal Place of Business 7365 FAIRWAY DR 7365 FAIRWAY DR MIAMI LAKES FL 33014 MIAMI LAKES FL 33014 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State Not Applicable 65-11358 \$8.75 Additional Country 5. Certificate of Status Desired Zip Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name, Street Address (P.O. Box Number is Not Acceptable) CARDENAS, FRANCISCO 7365 FAIRWAY DR MIAMI LAKES FL 33014 Zip Code City purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity subj . (NOTE: Registered Agent signature required when reinstating) SIGNATURE t and title if applicable Signature, types of p FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing sfy its Intangible 9. This corporation is eligible to a After May 1, 2002 Fee will be \$550.00 Added to Fees Tax filing requirement and elects to do so Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Addition ☐ Change TITLE ☐ Delete TITLE NAME PACHECO, JUAN R NAME STREET ADDRESS 7365 FAIRWAY DR STREET ADDRESS CITY-ST-ZIP MIAMI LAKES FL 33014 CITY-ST-ZIP Change ■ Addition TITLE ☐ Delete **VD** TITLE NAME CARDENAS, FRANCISCO NAME STREET ADDRESS 7365 FAIRWAY DR STREET ADDRESS CITY-ST-ZIP MIAMI LAKES FL 33014 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CÎTY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Justicities filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information or 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied indicated on this report or supplemental re of the corporation or the receiver or trustee