## 2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## Sep 16, 2002 8:00 am Secretary of State P01000101310 DOCUMENT # 1. Entity Name 09-16-2002 90091 045 \*\*\*150.00 PATRIOT TOOL & MANUFACTURING TECHNOLOGIES, CORP. Principal Place of Business Mailing Address 4401 - 112TH TERR. NORTH 4401 - 112TH TERR: NORTH CLEARWATER FL 33762 CLEARWATER FL 33762 2. Principal Place of Business 3. Mailing Address 4401 - 112 th TERRACE 4401 -112 + TERRACE NORTH Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Cify & State City & State 4. FEI Number Applied For 59-3750729 LEAR WATER LEARWATER Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired 33762 <u>33767</u> Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LOVELACE, WILLIAM K ESQ. Street Address (P.O. Box Number is Not Acceptable) 401 S. LINCOLN AVE. CLEARWATER FL 33756 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 短腳點隊 FILE NOW!!! FEE IS \$550.00 (9) This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 (4/02)☐ Delete TITLE ☐ Change Addition SAMUELS, DAVID A NAME NAME **CR2E034** STREET ADDRESS 4401 - 112TH TERR. NORTH STREET ADDRESS **CLEARWATER FL 33762** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify 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 sport 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

**FILED** 

Attachment De. # P010001013/0

Patriot Tool & Manufacturing Technologies Corp. 4401 112th Terrace N. Suite F Clearwater, Fl. 33762

September 11, 2002

Florida Department of State Division of Corporations Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahasse, FI 32302-1500

To Whom It May Concern:

## **Subject: Uniform Business Report**

Per a telephone conversation today with a representative from your department. I have been instructed to enclose this letter explaining that I did not receive a request for the \$150.00 annual payment. I have only received a request for a \$550.00 late payment. I have also enclosed a check for the original \$150.00 fee, as instructed by your division. Patriot Tool is a new corporation, and I was not aware of the Uniform Business Report procedures. I apologize for any problems that this situation has caused.

Sincerety

.

David A. Samuelson

Patriot Tool & Manufacturing Technologies Corp.