

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000105206

Entity Name: NATIONAL BIOTECH, INC.

FILED
Apr 04, 2003
Secretary of State

Current Principal Place of Business:

1610 OAK VIEW DR.
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

1610 OAK VIEW DR.
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 80-0021727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIGGINS, DEBORAH
1610 OAK VIEW DR.
SARASOTA, FL 34232

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAHMAN, DEBORAH
Address: 1610 OAK VIEW DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: S () Delete
Name: RAHMAN, DEBORAH
Address: 1610 OAK VIEW DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: T () Delete
Name: RAHMAN, DEBORAH
Address: 1610 OAK VIEW DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RAHMAN, FREDERICK
Address: 1610 OAK VIEW DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: WIMPEY, DANIEL
Address: 6025 PROMENADE CT.
City-St-Zip: BRADENTON, FL 34203

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORAH RAHMAN

S

04/04/2003

Electronic Signature of Signing Officer or Director

Date