

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

102

DOCUMENT # PO100011118
1. Entity Name
Lewis Technology Supply Inc.



03 MAR 24 AM 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
15826 SW 51 St
Suite, Apt. #, etc.

3. Mailing Address
15826 SW 51 St
Suite, Apt. #, etc.

2002-2003 UBR

City & State
Miramar FL
Zip
33027 Country
USA

City & State
Miramar FL
Zip
33027 Country
USA

4. FEI Number
65-1156769
Applied For
☐ Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Pascale Leon
Street Address (P.O. Box Number is Not Acceptable)
15826 SW 51 St
City
Miramar FL Zip Code
33027

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 Pascale Leon DATE 3-21-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Pascale Leon</u> <u>15826 SW 51 St</u> <u>Miramar, FL 33027</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>800014558908</u> <u>03/24/03--01086--015 **300.00</u>
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Pascale Leon DATE 3-21-03 (786) 547-4440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034B (12/02)

LEWIS TECHNOLOGY SUPPLY, INC
15826 SW 51 STREET
MIRIMAR, FL 33027

February 22, 2003

To: DEPARTMENT OF STATE
CORPORATE FILING SECTION
409 EAST GAINES STREET
TALLAHASSEE, FL 32314


RE: Corporation Reinstatement and Fees
FL Document #P01000111118
~~EIN# 65-1156769~~

Attn: Katherine Harris;

My accountant was gathering all of my documents and he noticed that my annual report had not been filed. I, Pascale Leon, moved and never received my annual reports. I am still doing business in Florida. Please accept the filing fees for the Annual Report for years 2002 and 2003 of \$150.00 each, a total of \$300.00 and reinstate my corporation.

Thank you.

Sincerely,



Pascale Leon
President of Lewis Technology Supply, Inc