


# **FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

FILED

03 NOV 18 PM 3:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #	902000008608	
1. Entity Name Biziteks Incorporated		

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 320 N Magnolia Avenue Suite, Apt. #, etc. Suite B-3 City & State Orlando, FL Zip 32801 Country USA		3. Mailing Address 320 N Magnolia Avenue Suite, Apt. #, etc. Suite B-3 City & State Orlando, FL Zip 32801 Country	
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**REINSTATEMENT**  
DO NOT WRITE IN THIS SPACE

<b>DO NOT WRITE IN THIS SPACE</b>		4. FEI Number 80-0030521		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
		7. Name and Address of Current Registered Agent		
		Name Chris Adragna Street Address (P.O. Box Number is Not Acceptable) 3700 Chelsea Street City Orlando FL Zip Code 32803		

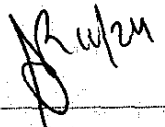
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE 11/13/2003  
(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	Director Steve Sequenzia 320 N Magnolia Avenue - Suite B-3 Orlando, FL 32801	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800024799988 11/18/03--01045--022 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Chris Adragna 320 N Magnolia Avenue - Suite B-3 Orlando, FL 32801	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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:  DATE \_\_\_\_\_ DAY/MON/PHONE # \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/02)

# BIZITEKS

*Business Meets Technology*

November 13, 2003

Regarding Dissolution for Biziteks Incorporated:

The enclosed Notice of Administrative Dissolution or Revocation has arrived at our correct address for the first time, today, November 13, 2003.

On March 1, 2003 Biziteks Incorporated submitted a UBR for an address change.

**At no fault of ours, that address change was not filed.** Enclosed is a *second* UBR, with the correct address changes.

Enclosed is a check for \$150. We have been wrongly fined the reinstatement fee of \$600. Please accept this payment as paid in full, and reinstate our corporation.

Thank you.

Sincerely,



Chris Adragna