

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90972 033 ***150.00

04/23/02 AV

DOCUMENT # P02000035722

1. Entity Name
U-TECH CONSULTING, INC.



Principal Place of Business
15210 AMBERLY DR.
1913
TAMPA FL 33647

Mailing Address
15210 AMBERLY DR.
1913
TAMPA FL 33647



2. Principal Place of Business
5253 VILLAGEBROOK DR.
Suite, Apt. #, etc.

3. Mailing Address
5253 VILLAGEBROOK DR.
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
WESLEY CHAPEL, FL
Zip
33543
Country
US

City & State
WESLEY CHAPEL, FL
Zip
33543
Country
US

4. FEI Number
04-3632493

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

UNGER, MICHAEL J
15210 AMBERLY DR.
1913
TAMPA FL 33647

7. Name and Address of New Registered Agent

Name
MICHAEL J. UNGER
Street Address (P.O. Box Number is Not Acceptable)
5253 VILLAGEBROOK DR.
City
WESLEY CHAPEL **FL** Zip Code
33543

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 *Michael J. Unger* **MICHAEL J. UNGER** **PRESIDENT** **04/28/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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	P	<input type="checkbox"/> Delete
NAME	UNGER, MICHAEL J	
STREET ADDRESS	15210 AMBERLY DR. #1913	
CITY-ST-ZIP	TAMPA FL 33647	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICHAEL J. UNGER	
STREET ADDRESS	5253 VILLAGEBROOK DR.	
CITY-ST-ZIP	WESLEY CHAPEL, FL 33543	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Michael J. Unger* **MICHAEL J. UNGER** **04/28/03** **813-477-0540**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)