

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90158 017 ***150.00

DOCUMENT # P02000062580

1. Entity Name
SUNTECH GROUP CORPORATION



Principal Place of Business
4815 NW 79 AVE.
SUITE 7
MIAMI, FL 33166

Mailing Address
4815 NW 79 AVE.
SUITE 7
MIAMI, FL 33166

2. Principal Place of Business
4811 NW 79 AVE

3. Mailing Address
4811 NW 79 AVE

Suite, Apt. #, etc.
SUITE 2

Suite, Apt. #, etc.
SUITE 2

City & State
MIAMI, FL

City & State
MIAMI, FL

Zip **33166** **Country** **USA**

Zip **33166** **Country** **USA**

4. FEI Number
04-3677766

Applied For
Not Applicable

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

☐ **CHECK HERE IF MAKING CHANGES**

6. Name and Address of Current Registered Agent

UZCATEGUI, LUISA
19370 COLLINS AVE
104B
AVENTURA BEACH FL 33160

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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** ☐ **Delete**
NAME **UZCATEGUI, ADHIR**
STREET ADDRESS **4811 NW 79 AVE. SUITE 2**
CITY-ST-ZIP **MIAMI, FL 33166**

TITLE **P** ☐ **Delete**
NAME **NAVARRO, ANGEL**
STREET ADDRESS **4811 NW 79 AVE SUITE 2**
CITY-ST-ZIP **MIAMI FL 33160**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
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TITLE ☐ **Change** ☐ **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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NAVARRO

04/14/2003

305-4369004

Date

Daytime Phone #

CR2E034 (10/02)