## 2004 FOR PROFIT CURPURATION

## FILED Apr 16, 2004 08:00 AM Secretary of State **DOCUMENT # P02000131528** E-TECH UNLIMITED, INC. Principal Place of Business Mailing Address 733 LIGHTHOUSE DR. 733 LIGHTHOUSE DR. N. PALM BCH. FL 33408 N. PALM BCH, FL 33408 04142004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 54-2086801 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. DO NOT WRITE 1840 SW 22ND ST. 4TH FLOOR IN THIS SPACE MIAMI, FL 33145 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 100000115482 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 04/16/04-80026-013 150.00 10. OFFICERS AND DIRECTORS TIDLE **PSTD** ORANEN, ERIC NAME ... STREET ADDRESS 733 LIGHTHOUSE DR. CITY-ST-7IP N. PALM BCH, FL 33408 TITLE MAUF STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CTTY-ST-ZIP MLE NAME STREET ADDRESS CRY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this fitting 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:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR