

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

FILED
Jun 09, 2004 8:00 am
Secretary of State

06-09-2004 90004 009 ***150.00

DOCUMENT # *P93000011598*

1. Entity Name

Technicity, Inc.



DO NOT WRITE IN THIS SPACE

44046487

2. Principal Place of Business

4400 N. Federal Hwy.

3. Mailing Address

4400 N. Federal Hwy.

Suite, Apt. #, etc.

54

Suite, Apt. #, etc.

54

City & State

Boca Raton, FL

City & State

Boca Raton, FL

Zip

33431

Country

Zip

33431

Country

4. FEI Number

59-3170010

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

GARY M. COHEN, ESQ.

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

925 S. FEDERAL HWY. #776

City

Boca Raton

FL

Zip Code

33432

**DO NOT WRITE
IN THIS SPACE**

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

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 *DIP*
NAME *INGBER, JOSEPH*
STREET ADDRESS *99 SE MEZNER BLVD. #525*
CITY-ST-ZIP *BOCA RATON, FL 33432*

TITLE *T*
NAME *GARY M. COHEN, ESQ.*
STREET ADDRESS *925 S. FEDERAL HWY. #776*
CITY-ST-ZIP *BOCA RATON, FL 33432*

TITLE *S*
NAME *INGBER, JOSEPH*
STREET ADDRESS *99 SE MEZNER BLVD. #525*
CITY-ST-ZIP *BOCA RATON, FL 33432*

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:

Joseph L. Ingber, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/7/04
Date

561-866-5610
Daytime Phone #

CR2E034B (12/02)

Attachment

44646487

June 4, 2004

Technicity, Inc.
4400 N. Federal Hwy. #54
Boca Raton, FL 33431

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I received no Uniform Business Report form this year for Technicity, Inc. prior to May 1, 2004; nor did I receive any other correspondence regarding the UBR. I had to call the Division in May and specifically request that the form be sent. I was told that no penalty would apply, in light of the circumstances, and that I should remit the \$150 which would normally be payable before May 1. I am sending the form and check as soon as possible, via priority mail.

Thank you for your consideration.

Sincerely,



Joseph R. Ingber, President
Technicity, Inc.