

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 12, 2000 8:00 am**  
**Secretary of State**  
09-12-2000 90016 004 \*\*\*150.00

DOCUMENT #

P93000019467

1. Entity Name

POLAR TECH, INC

R

Principal Place of Business

Mailing Address

16110 Saddle Ln  
Tamarac, FL  
Weston, FL, 33326

16110 SADDLE LN  
WESTON, FL  
33326

2. Principal Place of Business

3. Mailing Address

8209 N Pine Island Rd  
Suite, Apt. #, etc.

8209 N Pine Island Rd  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Tamarac, FL

Zip

33321

Country

USA

City & State

Tamarac, FL

Zip

33321

Country

USA

4. FEI Number

65-0402372

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOFFI, EMILIO V  
16110 SADDLE LN  
WESTON, FL, 33326

Name

GOFFI, EMILIO

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

833 8209 N Pine Island Rd

City

Tamarac

FL

Zip Code

33321

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.

SIGNATURE

EMILIO VICTOR GOFFI

08/10/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution.

☐

\$5.00 May Be

Added to Fees

11.

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

President  
EMILIO VICTOR GOFFI  
833 VISTA MEADOWS DR  
WESTON, FL, 33327

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

EMILIO VICTOR GOFFI

08/10/00

(954) 294-7740

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

**POLAR TECH, INC.**  
8209 N. Pine Island Rd.  
Tamarac, Florida, 33321

*attachment  
P93000019467  
B0105498*

August 15, 2000

Dear Division of Corporations Representative:

As instructed by Thampton on 07-05-2000

I am hereby explaining our company's situation for the last few months.

We have moved twice in the past few months due to some strategic and financial circumstances and were not able to receive the application for renewal for our corporation.

Having recently settled at the above address and going through our records, we realized that the renewal had not been filed.

~~We respectfully request that the late fees be waved.~~

We are enclosing the \$150.00 renewal fee together with the completed Uniform Business Report to include are new and updated information.

We appreciate your kindness and great quality of service,

Please feel free to contact us if you need any additional information.

Sincerely,



Emilio Victor Goffi  
Company President  
Polar Tech, Inc