(9/01)

CR2E034

## 2002 Uniform Business Report (UBR)

## Apr 11, 2002 8:00 am Secretary of State DOCUMENT # P93000024229 1. Entity Name 04-11-2002 90047 020 \*\*\*150 00 CENTEC-21, INCORPORATED Mailing Address Principal Place of Business 621 ALOHA AVE. 621 ALOHA AVE. COCOA FL 32927 **COCOA FL 32927** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0393301 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROBERSON, ANN Street Address (P.O. Box Number is Not Acceptable) **621 ALOHA AVENUE** COCOA FL 32927 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See cateria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE ☐ Change Addition TITLE Delete CEO NAME NAUGHTON, MICHAEL D NAME STREET ADDRESS STREET ADDRESS 1257 TASNAN DR, STE A CITY-ST-ZIP CITY-ST-ZIP SUNNYVALE CA 94089 Change ☐ Addition TITLE ☐ Delete TITLE CF0 ASAY, ROGER NAME 8870 MURAOKADR. STREET ADDRESS STREET ADDRESS <del>1257 Tasnan dr, Ste a</del> CITY-ST-ZIP CITY-ST-ZIP SUNNYVALE GA-94089 ΓΩ Change ☐ Addition TITLE ☐ Delete TITLE 8870 MURAUKA DR MANSHACK; ROSEANNE~ NAME. NAME -- --STREET ADDRESS STREET ADDRESS <del>1257 TASNAN DR. STE A</del> CITY-ST-ZIP CITY-ST-7IP SUNNYVALE CA 94089 ☐ Addition TITLE TITLE ☐ Delete NAME NAME SAUNDERS, PAUL 8870 MULAOKA DE. Gi'LOY, CA 95020 STREET ADDRESS STREET ADDRESS <del>1257 Tasnan dr. Ste a</del> CITY-ST-ZIP CITY-ST-ZIE SUNNYVALE CA-94089 ☐ Addition ☐ Delete TITLE TITLE NAME NAME KOHLMAN, RICHARD STREET ADDRESS STREET ADDRESS 1257-TASNAN DR; STE A\* CITY-ST-ZIP CITY-ST-ZIP SUNNYVALE CA 94089 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 eath; that I am an efficer 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

SIGNATURE:

changed, or on an attachment with

Date Daytime Phone #