

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000078908

1. Entity Name

AXIOM TECHNOLOGY INTERNATIONAL CORPORATION

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90078 043 ***150.00

Principal Place of Business

Mailing Address

1333 GATEWAY DRIVE
SUITE 1005
MELBOURNE FL 32901
US

1333 GATEWAY DRIVE
SUITE 1005
MELBOURNE FL 32901-2635
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3214332

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HLADKY, MARK
AXIOM TECHNOLOGY INTERNATIONAL
1333 GATEWAY DR. SUITE 1003
MELBOURNE FL 32901

Name

HOLMES, EDWARD

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

AXIOM TECHNOLOGY INTERNATIONAL

1333 GATEWAY DRIVE, SUITE 1005

City

MELBOURNE

FL

Zip Code

32901-2623

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

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

EDWARD A. HOLMES, Vice President

5/1/00

(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 PSTD ☐ Delete
NAME HLADKY, MARK
STREET ADDRESS 143 CAMBRIDGE CT.
CITY-ST-ZIP INDIAN LANTIC FL 32903

TITLE V ☒ Change ☐ Addition
NAME HLADKY, MARK
STREET ADDRESS 143 CAMBRIDGE COURT
CITY-ST-ZIP INDIAN LANTIC, FL 32903

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☐ Change ☒ Addition
NAME HOLMES, EDWARD
STREET ADDRESS 24 MARINA ISLES BLVD
CITY-ST-ZIP INDIAN HARBOR BEACH, FL 32937

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P/O/C ☐ Change ☒ Addition
NAME KLINSPOAT, EDWARD J.
STREET ADDRESS 1845 N. HOWY AIA, UNIT # 202
CITY-ST-ZIP INDIAN LANTIC, FL 32903

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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:

Edward A. Holmes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDWARD A. HOLMES, Vice President

5/1/00 (321) 726-9904

Date

Daytime Phone #

CR2E034 (9/99)