

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 13, 2001 8:00 am**  
**Secretary of State**

02-13-2001 90592 009 \*\*\*158.75

**DOCUMENT # P94000065897**

1. Entity Name

**CENTURY TECHNOLOGY, INC.**

Principal Place of Business

5000 SW 52ND ST  
 BAY #513  
 DAVIE FL 33314  
 US

Mailing Address

5000 SW 52ND ST  
 BAY #513  
 DAVIE FL 33314  
 US

2. Principal Place of Business

**1754 SW 109<sup>th</sup> Terrace**

3. Mailing Address

**1754 SW 109<sup>th</sup> Terrace**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**DAVIE FL**

City & State

**DAVIE FL**

Zip

**33324**

Country

**USA**

Zip

**33324**

Country

**USA**

4. FEI Number

**65-0522200**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**SANTOS, MAURO C ESQ  
 25 SE SECOND AVE  
 INGRAHAM BLDG, SUITE 1235  
 MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

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

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, 2001 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

TITLE ☐ Delete

**DP  
 MENDES, JOSE  
 RUA CAIUBI, 324, APT 32  
 SAO PAULO SP 05010-000**

TITLE ☐ Delete

**DVPS  
 FILHO, ALBERTO SENTIE  
 RUA GUILHERMINA, 291  
 SAO PAULO SP 02469-040**

TITLE ☐ Delete

**DT  
 MATTOS, ROBERTO  
 1756 SE 109TH TERRACE  
 DAVIE FL 33324**

TITLE ☐ Delete

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

**9 Sandburg Drive  
 Morganville, NJ 07751**

TITLE ☐ Change ☐ Addition

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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:

**Roberto Mattos**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**02/04/01**  
 Date

**(732) 617-7251**  
 Daytime Phone #

CR2E034 (10/00)