¿2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9400083433 1. Entity Name TECH PRODUCTS MARKETING CORP.							FILED SECRETARY OF STATE SECRETARY OF STATE OF CORPORATIO OO SEP -5 AM 7:41				
Principal Place 3741 N.E. 1631 NGRTH MIAMI	RD ST.: SUITE BEACH FL &	-145 9160	Mailing Address 3341-N.E. 163RD-6T SUITE-145- NORTH MIAMI BEACH FL 33160 P.O. B EX 226756 WITH MIAMI STA 33122								11 66 1111 1 76 7
Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State				4. FEI Numbe			Ар	plied For
Zìp		Country	Zíp	ry		5. Certificate of	of Status Desired	□ \$	No 8.75 Add se Required		
MORTON, ROGER 9741 N.E. 163RD ST., SUITE 145 NORTH MIAMI BEACH FL 33160 1944 N.E. 163 STARRE NO.M.AMI BEACK FLA 33/62 8. The above named entity submits this statement for the purpose of changing its reg					Street Ad	idress (P.C GHO YY N M. N.M.	E. 16	is Not Acceptable 3 571 - C 4 Fla 33	# 3/62FL	Zip Code)
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) Tax filing requirement and elects to do so. See criteria on back)						oe \$750.0	Trus	ction-Campaign Fir t Fund Contribution	n. 🗆	Added	to Fees
TITLE NAME STREET ADDRESS CITY-ST-ZIP		OFFICERS AND D ROGER 163RD ST., SUITE 145 HAMI BEACH FL 33160	☐ Delete		1	.,		CHÂNGES TO OFF		Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	E/O 3741	TILLO, MARIA N.E. 163RD ST., SUITI HAMI BEACH FL 33160	Delete D.O. BOAYV MINMIFASS	STREE	T ADDRESS ST-ZIP	grae,	O	0003 -09/06 ****1	50.00	***** [:	
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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: SIGNATURE DATE OF SIGNING OFFICER OF DIRECTOR Date Daytime Phone *											

Phones 947-9877 or 947-9892

ACCOUNTING BOOKEEPING BUSINESS ADVISOR TAX RETURNS

VICTOR REINER ASSOCIATES, INC.

1944 N.E. 163RD STREET No. MIAMI BEACH, FLA. 33162

PERSONALIZED ATTENTION

VICTOR REINER

MEMBER FLORIDA ASSOCIATION OF INDEPENDENT ACCOUNTANTS

t/v3/00

MA. SHAWN TONE 2

DIV. OF COLDONATIONS

P.O. BOX 63Y7

TAILA HASSEE, FLA 32314

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AT PAR OUR CONCENTIONS OF Shis/2000. Plande

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OF FOUND THE LETTER MA. MORTON AND A NEW

ADDRESS Which WILL forward the MAIL MORE

ANIFLY TO VENEZULO.

Condinity form

P.S. WE WOULD Appreciate.
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