FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500000806

1. Corporation Name UETECH, INC.

Principal Place of Business

10916 NW 40TH ST

Mailing Address

10916 NW 40TH ST

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90096 021 ***150.00



SUNRISE FL 33 US	351	Sunrise FL 33351 US				DO NOT WRITE IN THIS SPACE						
00		00			3.	3. Date Incorporated or Qualifed						
						01/03/1	1995					
2. Principal Pl	ace of Business	2a. Mailing Address			4.	FEI Numi					+	ied For
21 <i>9/3</i>	5 Vineyard LAKE DA	26 9135 linesard	LAKE	2 DR		35-0 <u>54</u>	<u>4891</u>					Applicable
Suite, Apt.		Suite, Apt. #, etc.				Certifcate	of Status	Desired ·			75 Ac se Req	lditional uired
City & State City & State			/					Financing			.00 N	
23 Plantation T 28 Plantation, the			Country		-	Trust Fun					ded to	Fees
ZIP 	S- 25 USA	29 33323 30	-	- 4			oration ov Property		rent year int	angible Yes	. [No
24 95525	9. Name and Address of Current I		<u>, 47</u>						Registered			
ېدورو			81	Name					_			
SINDICICH, NICHOLAS III				82 Street Address (P.O. Box Number is Not Acceptable)								
1091			Street At	ופן אטעוופסט (ד.ט. סטג ואטוווטפן וס ואטן אטטפונומטום)								
SUNI	RISE FL 33351		83									1
	•		84	City	•				FL	85	Zip Co	ode
44 Dureuant	to the provisions of Sections 607.0502	and 607 1508 Florida Statutes	the above	e-named co	orporation	n submits t	this stater	nent for the	e purpose of	changir	ng its n	egistered
office or re	egistered agent, or both, in the State of maniliar with, and accept the obligation	Florida. Such change was auth	onzed by	tne corpora	ation's bo	ard of dire	ectors. I h	ereby acce	ept the appoi	ntment	as regi	stered
ū	The state of the s											
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Re	gistered Agen	t signature requ					DATE			
12.	OFFICERS AND		13.			ADDITION	S/CHANC	SES TO O	FFICERS AN			
TITLE	PD	☐ DELETE	1.1 TITLE						•	Cha	_	□ Addition
NAME			1.2 NAME		A 126	· Vine	Yard	LAK	3332			
STREET ADDRESS			1.3 STREET	ADDRESS	7/20	7711-	- ,	,				
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-S	r-ZIP	PIAN	tati	<u>'011,</u>	<i>f</i> -/·	3552		200	Addition
TITLE		☐ DELETE	2.1 TITLE				-				ange	
NAMÉ			2.2 NAME									
STREET ADDRESS			2.3 STREET									
CITY-ST-ZIP	-	DELETE	2.4 CITY-S	T-ZiP		* .	`			Cha	anne	Addition
TITLE	•	C) DELETE	3.1 TITLE							□ ◊."	ui igo	
NAME			3.2 NAME									
STREET ADDRESS			3.3 STREET									
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S 4.1 TITLE	T-ZIP						[] Ch	anne	Addition
TITLE		O DECEIE									ungo	
NAME			4.2 NAME									
STREET ADDRESS			4.3 STREET									
CITY-ST-ZIP		☐ DELETE	4,4 CITY-S' 5.1 TITLE	T-ZiP						☐ Ch	ange	Addition
TITLE			5.2 NAME								~··g=	
NAME			5.3 STREET	ADDRESS				`				
STREET ADDRESS			5.4 CITY-S									
CITY-ST-ZIP	· . . .	☐ DELETE	6.1 TITLE	. : 2.11						☐ Chi	ange	Addition
TITLE			6.2 NAME								-3-	_ ,, ,,,
NAME	ر در در در از در در از در		6.3 STREET	ADDRESS								[
STREET ADDRESS	ام الاستان المام الم المام المام ال			1								ł
CITY-ST-ZIP	and the second second		6.4 CITY-S	1-411								

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on with all other like empowered.

SIGNATURE: