

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90106 029 ***150.00

DOCUMENT # P95000008247

1. Entity Name

HOTOFFICE TECHNOLOGIES, INC.

Principal Place of Business

5201 CONGRESS AVE.
CE 232
BOCA RATON FL 33487

Mailing Address

5201 CONGRESS AVE.
CE 232
BOCA RATON FL 33487-3629

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0555805**

Applied For

Not Applied For

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PADVEEN, STEWART
5201 CONGRESS AVE
CE 232
BOCA RATON FL 33487

7. Name and Address of New Registered Agent

Name

MICHAEL R. MOORE

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

5201 CONGRESS AVE

CE 232

City

BOCA RATON

FL

Zip Code

33487

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]

MICHAEL R. MOORE

1-10-00

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, 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

TITLE **CD** ☒ Delete
NAME **PADVEEN, STEWART**
STREET ADDRESS **5201 CONGRESS AVE. CE 232**
CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE **D** ☒ Delete
NAME **MAINOR, ROBERT**
STREET ADDRESS **5201 CONGRESS AVE #CE232**
CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE **D** ☒ Delete
NAME **RATTNER, STEPHEN J**
STREET ADDRESS **5201 CONGRESS AVE, C-232**
CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE **D** ☐ Delete
NAME **THORNE, OAKLEIGH**
STREET ADDRESS **5201 CONGRESS AVE, C-232**
CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE **D** ☐ Delete
NAME **BLUMENSTEIN, JACK W.**
STREET ADDRESS **5201 CONGRESS AVE, C-232**
CITY-ST-ZIP **BOCA RATON FL 33487**

TITLE **D** ☐ Delete
NAME **SAGAN, PAUL**
STREET ADDRESS **5201 CONGRESS AVE, C-232**
CITY-ST-ZIP **BOCA RATON FL 33487**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DIRECTOR C/D** ☐ Change ☒ Addition
NAME **R. MICHAEL FRANZ**
STREET ADDRESS **5201 CONGRESS AVE. CE 232**
CITY-ST-ZIP **BOCA RATON, FL 33487**

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

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

TITLE ☐ Change ☐ Addition
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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:

[Signature]

R. MICHAEL FRANZ, CHAIRMAN/CEO

Date

Daytime Phone #