

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000076162

1. Entity Name

RADIO FREQUENCY TECHNOLOGIES INC..

**FILED**  
**May 18, 2000 8:00 am**  
**Secretary of State**

05-18-2000 90368 018 \*\*\*150.00

Principal Place of Business

7190 WILSON STREET  
HOLLYWOOD FL 33024  
US

Mailing Address

7190 WILSON STREET  
HOLLYWOOD FL 33024-3848  
US

2. Principal Place of Business

1072 Providence Blvd

3. Mailing Address

1072 Providence Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Deltona FL

City & State

Deltona FL

4. FEI Number

59-3347677

Applied For

Not Applicable

Zip

Country

32725 USA

Zip

Country

32725 USA

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

STARKEY, MARGARET  
7190 WILSON STREET  
HOLLYWOOD FL 33024

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, 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 PV  
NAME STARKEY, GREGG P  
STREET ADDRESS 7190 WILSON STREET  
CITY-ST-ZIP HOLLYWOOD FL 33024 ☒ Delete

TITLE TS  
NAME STARKEY, RONALD J  
STREET ADDRESS 7190 WILSON STREET  
CITY-ST-ZIP HOLLYWOOD FL 33024 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE PVT S  
NAME Starkey Ronald J  
STREET ADDRESS 1072 Providence Blvd  
CITY-ST-ZIP Deltona FL 32725 ☒ Change ☐ Addition

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

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

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

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

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:

*Ronald J. Starkey*

RONALD J. Starkey

4-28-00

407 860 8766

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)