2000 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 20, 2000 8:00 am Secretary of State DOCUMENT # P96000001980 1. Entity Name WRAP-TECH, INC. 01-20-2000 90168 034 ***150.00 Mailing Address Principal Place of Business 8200 YARDLEY AVE N 8200 YARDLEY AVE N ST PETERSBURG FL 33710 ST PETERSBURG FL 33710-3668) **(1888) | 18 | 1888 | 1**884 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**84 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 | **18**44 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-3357160 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ANDERSON, BRIAN K Street Address (P.O. Box Number is Not Acceptable) 8200 YARDLEY AVE N ST PETERSBURG FL 33710 Zip Code City 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. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE Change Addition Delete TITLE ANDERSON, BRIAN NAME NAME STREET ADDRESS STREET ADDRESS 8200 YARDLEY AVE N CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL Addition ☐ Delete ☐ Change TITI F TITLE NAME STREET ADORESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME: STREET ADDRESS STREET ADDRESS City-St-ZiP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not quality 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 eath; 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 ampowered.