

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000016404

1. Entity Name

INFRARED THERMAL IMAGING CORPORATION

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

09-18-2000 90013 040 \*\*\*550.00

Principal Place of Business

5405 CYPRESS CENTER DRIVE.. STE 220  
TAMPA FL 33609

Mailing Address

5405 CYPRESS CENTER DRIVE.. STE 220  
TAMPA FL 33609

2. Principal Place of Business

3001 N. Rocky Point Dr.

3. Mailing Address

3001 N. Rocky Point Dr.

Suite, Apt. #, etc.

Suite 335

Suite, Apt. #, etc.

Suite 335

City & State

Tampa, Florida

City & State

Tampa, Florida

4. FEI Number

59-3384142

Applied For

Not Applicable

Zip

33607

Country

USA

Zip

33607

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

KNETTEL, MICHAEL

5405 CYPRESS CENTER DRIVE., STE 220  
TAMPA FL 33609

7. Name and Address of New Registered Agent

Name

Reza Yazdani

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

3001 N. Rocky Point Drive

Suite 335

City

Tampa

FL

Zip Code

33607

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

9/13/2000

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 PST ☒ Delete  
NAME KNETTEL, MICHAEL  
STREET ADDRESS 5405 CYPRESS CENTER DRIVE., STE 220  
CITY-ST-ZIP TAMPA FL 33609

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST ☒ Change ☐ Addition  
NAME Reza Yazdani  
STREET ADDRESS 3001 N Rocky Point Drive, Ste. 335  
CITY-ST-ZIP Tampa, FL. 33607

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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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9/13/2000

CR2E034 (5/00)