

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State

03-29-2001 90376 027 ***150.00

0135163

DOCUMENT # P96000042691

1. Entity Name

COLORALL TECHNOLOGIES INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

1540 N POWERLINE RD
 PARKLAND FL 33069
 US

1540 N POWERLINE RD
 PARKLAND FL 33069
 US

001314



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0748562

Applied For

Not Applicable

Zip

Country

Zip

Country

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

ROSENBRIER, GILBERT
7000 E. CYPRESS HEAD DRIVE
PARKLAND FL 33065

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 _____ (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, 2001 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: Delete
 NAME: **DM ROSENBRIER, GILBERT**
 STREET ADDRESS: **7000 EAST CYPRESSHEAD DRIVE**
 CITY-ST-ZIP: **PARKLAND FL 33065**

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Delete
 NAME: **ST ROSENBRIER, CLAUDETTE**
 STREET ADDRESS: **7000 EAST CYPRESSHEAD DRIVE**
 CITY-ST-ZIP: **PARKLAND FL 33065**

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Delete
 NAME: **VP PRIGAL, GERALD S**
 STREET ADDRESS: **218 VIA D'ESTE #1303**
 CITY-ST-ZIP: **DELRAY BEACH FL 33445**

TITLE: Change Addition
 NAME: **VP PRIGAL, GERALD S.**
 STREET ADDRESS: **3300 NE 191 ST ST. # 1514**
 CITY-ST-ZIP: **AVENTURA, FL 33180**

TITLE: Delete
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Delete
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Delete
 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GILBERT ROSENBRIER

3/29/01
 Date

954-969-1599
 Daytime Phone #

CR2E034 (10/00)