

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 08, 2003 8:00 am
Secretary of State

0169790 AV

05-08-2003 90168 001 ***158.75

DOCUMENT # P96000066936

1. Entity Name
G3 TECHNOLOGIES, INC.



Principal Place of Business
~~+2192 BRANDING IRON CT.~~
~~WEST PALM BEACH FL 33414~~
~~US~~

Mailing Address
C/O LANCE P. MIRRER, CPA
BOX 260879
PEMBROKE PINES FL 33026



2. Principal Place of Business
15394 75th Way North

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
Palm Beach Gardens, FL

City & State

4. FEI Number **38-3306757**

Applied For
Not Applicable

Zip **33418** Country **Palm Beach**

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

MIRRER, LANCE P.
5400 S. UNIVERSITY DR., STE. 601
DAVIE FL 33328

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** Delete
NAME **HANKS, GRAYSON C III**
STREET ADDRESS ~~12192 BRANDING IRON CT.~~
CITY-ST-ZIP ~~WELLINGTON FL 33414~~

TITLE Change Addition
NAME
STREET ADDRESS **15394 75th Way North**
CITY-ST-ZIP **Palm Beach Gardens, FL 33418**

TITLE **TS** Delete
NAME **HANKS, EMMA**
STREET ADDRESS **12192 BRANDING IRON CT.**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE Change Addition
NAME
STREET ADDRESS **15394 75th Way North**
CITY-ST-ZIP **Palm Beach Gardens, FL 33418**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED **Grayson C Hanks III** **4/30/2003** **561-746-5644**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CFR2E034 (10/02)