

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000030667

1. Entity Name

POMTECH INTERNATIONAL, INC.

FILED

Apr 28, 2001 8:00 am  
Secretary of State

04-28-2001 90047 028 \*\*\*150.00

Principal Place of Business

11925 ROYAL PALM BLVD.  
APT #411  
POMPANO BEACH FL 33065

Mailing Address

11925 ROYAL PALM BLVD.  
APT #411  
POMPANO BEACH FL 33065

2. Principal Place of Business

2166 NW 114TH TERRACE

Suite, Apt. #, etc.

3. Mailing Address

2166 NW 114TH TERRACE

Suite, Apt. #, etc.

City & State

CORAL SPRINGS, FL

City & State

CORAL SPRINGS, FL

4. FEI Number

65-0744175

Applied For

Not Applicable

Zip

Country

33071

U.S.A.

Zip

Country

33071

U.S.A.

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

POMALAZA, S M  
11925 ROYAL PALM BLVD.  
APT. #411  
POMPANO BEACH FL 33065

Name

S.M. POMALAZA

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

2166 NW 114TH TERRACE

City

CORAL SPRINGS, FL

Zip Code

33071

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

*Sonia M. Pomalaza*

SONIA M. POMALAZA

SECRETARY & TREASURER

04/20/01

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, 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 PD ☐ Delete  
NAME POMALAZA, ROBERTO  
STREET ADDRESS 11925 ROYAL PALM BLVD. SUITE #411  
CITY-ST-ZIP POMPANO BEACH FL 33065

TITLE PD ☒ Change ☐ Addition  
NAME POMALAZA, ROBERTO  
STREET ADDRESS 2166 NW 114TH TERRACE  
CITY-ST-ZIP CORAL SPRINGS, FL 33071

TITLE STD ☐ Delete  
NAME POMALAZA, SONIA M  
STREET ADDRESS 11925 ROYAL PALM BLVD. #411  
CITY-ST-ZIP POMPANO BEACH FL 33065

TITLE STD ☒ Change ☐ Addition  
NAME POMALAZA, SONIA M.  
STREET ADDRESS 2166 NW 114TH TERRACE  
CITY-ST-ZIP CORAL SPRINGS, FL 33071

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  
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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:

*Sonia M. Pomalaza*

SONIA M. POMALAZA

Date

04/20/01

Daytime Phone #

(954)345-7028

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)