2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT #

P97000031525

1. Entity Name

Zip

SIGNATURE

CANNATELLO, VINCENT

4532 BARRACUDA DRIVE **BRADENTON FL 34208-8480**

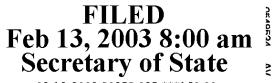
RHEMA TECH, INC.



Mailing Address Principal Place of Business 4532 BARRACUDA DRIVE 4532 BARRACUDA DRIVE BRADENTON FL 34208-8480, **BRADENTON FL 34208-8480**

6. Name and Address of Current Registered Agent

2. Principal Place of Business	3. Mailing Address 36/2 5 Ave North East
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State / F1 2442 6



02-13-2003 90278 027 ***150.00



DATE

	15	•	City	FL Zip Code	
8.	The above named entity subm	its this statement for the pur	pose of changing its registered office or registered agent,	or both, in the State of Florida. I am familiar with, and acce	pt
	the obligations of registered as	gent.			

(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 After May 1, 2003 Fee will be \$550.00

Country

Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check	Payable to Florida Department of State						
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RAMALHO, WILLIAM 85 EDWARD DRIVE FRANKLIN PARK FL 08823	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CANNATELLO, VINCENT 4532 BARRACUDA DRIVE BRADENTON FL 34208	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Uncer 3612 = Breden	et Conctello 5 Me North Est ton, Fl 34208	E Change Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	A LANGE TO SERVICE STATE OF THE SERVICE STATE OF TH	→ Pelete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	cortify that the information supplied with this filling	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ted in Section	119.07(3)(i), Florida Statutes. I fur	☐ Change	Addition

indicated on this report or 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.