

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90350 041 ***158.75

DOCUMENT # P97000042649

1. Entity Name

LOGI-TEC ENTERPRISES, INC.

Principal Place of Business

**1321 N.E. 209 TERRACE
NORTH MIAMI BEACH FL 33179**

Mailing Address

**1321 N.E. 209 TERRACE
NORTH MIAMI BEACH FL 33179**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0753526

Applied For

Not Applicable

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

**PALMER, WILLIAM O
1321 N.E. 209 TERRACE
NORTH MIAMI BEACH FL 33179**

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 *William O. Palmer*

Signature, typed or printed name of registered agent and title if applicable.

William O. Palmer

(NOTE: Registered Agent signature required when reinstating)

7-12-02

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 \$550.00
After September 13, 2002 Fee 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **PALMER, WILLIAM O**
STREET ADDRESS **1321 NE 209 TERRACE**
CITY-ST-ZIP **NO MIAMI BEACH FL 33179**

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

TITLE **VP** ☐ Delete
NAME **PALMER, JOAN**
STREET ADDRESS **1321 NE 209 TERRACE**
CITY-ST-ZIP **N MIAMI BEACH FL 33179**

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

William O. Palmer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-12-02 *305-653-0396*

Date

Daytime Phone #

CR2E034 (4/02)

LOGI-TEC ENTERPRISES, INC.



PHONE (305) 653-6396 CELL PHONE (305) 799-0403

1321 NE 209 TERRACE
NO. MIAMI BCH, FL 33179

BILL PALMER
PRESIDENT

Attachment

*# P97000042619
120458*

July 12, 2002

Florida Department of State
Division of Corporations

To whom it may concern:

Regarding my 2002 uniform business report. I did not receive this report earlier in the year. The attached report is the only one I have received.

Per your instructions I am sending in the attached report with the normal fee of \$150.00 plus the \$8.75 for a certificate of status desired.

Thanks for your help and for making it easy to find out the proper procedure.

Sincerely,

William O. Palmer
President