

2001 UNIFORM BUSINESS REPORT (UBR)

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FILED
Jul 02, 2001 8:00 am
Secretary of State

04-26-2001 90119 003 ***150.00

DOCUMENT # **PA7000055319**

1. Entity Name

MEGATOUCH

Principal Place of Business

165 Douglas St

Mailing Address

Same

Edgewater, Florida 32141

2. Principal Place of Business

165 Douglas St.

3. Mailing Address

165 Douglas St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Edgewater, FL 32141

City & State

Edgewater, FL 32141

4. FEI Number

59-3454091

Applied For

Not Applicable

Zip

32141

Country

USA

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**Winderweede, Haines, Ward & Woodman, P.A.
Attorneys At Law
PO Box 1391
Orlando, FL 32802-1391**

7. Name and Address of New Registered Agent

Name **FRED MEGAHEE**
Street Address (P.O. Box Number Not Acceptable)
165 DOUGLAS ST
EDGEWATER, FL
City **FL** Zip Code **32141**

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 **FRED C. MEGAHEE**

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

MEGATOUCH - FRED C. MEGAHEE 5/10/2001

(NOTE: Registered Agent signature required when reinstating) **SAME AS BEFORE**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President & Owner FRED C. MEGAHEE 165 Douglas St. Edgewater, FL 32141	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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 **FRED C. MEGAHEE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-386-345-0993

4-18-2001

Date

Daytime Phone #

CR2034 (1/00)