

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 11, 2000 08:00 AM****Secretary of State****DOCUMENT # P97000073776**

1. Entity Name

INDUSTRIAL PROCESS & ENGINEERING, INC.

Principal Place of Business

3450 E. LAKE RD.
206-11
PALM HARBOR
34685

FL

Mailing Address

PO BOX 4884
PALM HARBOR
34685

FL

2. Principal Place of Business

2076 BACKWATER TRAIL

3. Mailing Address

PO BOX 4919

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PALM HARBOR

FL

City & State

PALM HARBOR

FL

4. FEI Number

59-3480527

Applied For

Not Applicable

Zip

34685

Country

Zip

34685

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**

FORMAN ANDREW SESQ

807 BEARSS AVE

SUITE F

TAMPA

33613

US

FL

7. Name and Address of New Registered Agent

Name

FORMAN ANDREW SESQ

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

3355 W.BEARSS AVE

City
TAMPA

FL

Zip Code
33613

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

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

(NOTE: Registered Agent signature required when reinstating)

02/11/2000

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**TITLE VP ☒ Delete
NAME FORMAN ANDREW S
STREET ADDRESS 3450 E. LAKE ROAD, SUITE 206-11
CITY-ST-ZIP PALM HARBOR FL 34685TITLE P ☐ Delete
NAME SAITO LEO F
STREET ADDRESS 3450 E. LAKE ROAD, SUITE 206
CITY-ST-ZIP PALM HARBOR FL 34685TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE P ☒ Change ☐ Addition
NAME SAITO LEO F
STREET ADDRESS 3355 W.BEARSS AVE
CITY-ST-ZIP TAMPA FL 33618TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: Leo F. Saito

P 02/11/2000