

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000075283

1. Entity Name

ECO-TECH SERVICES, INC.

FILED

May 04, 2000 8:00 am
Secretary of State

05-04-2000 90181 001 ***150.00

Principal Place of Business

Mailing Address

170 NW SPANISH RIVER BLVD
BOCA RATON FL 33431
US

PO BOX 4546
DEERFIELD BEACH FL 33442-4546
US

2. Principal Place of Business

3. Mailing Address

170 NW Spanish River Blvd #18

~~170 NW Spanish River Blvd~~

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Boca Raton, FL

Zip Country

Zip Country

33431 USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARTEL, OLGA A
170 NW SPANISH RIVER BOULEVARD, #18
BOCA RATON FL 33431

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.

SIGNATURE

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, 2000 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 P
NAME MONTAGUE, HU DANIEL
STREET ADDRESS 232 NW 95TH AVE
CITY-ST-ZIP PLANTATION FL 33324 ☐ Delete

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

TITLE ST
NAME VERBITSKY, LILLONA
STREET ADDRESS 170 NW SPANISH RIVER BLVD #18
CITY-ST-ZIP BOCA RATON FL 33431 ☐ Delete

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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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:

Lillona Verbitsky
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-28-2000 561-393-5300

C.R. 1 034 (9/99)