## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE!

## FILED DOCUMENT # P9700095087 Jul 18, 2000 8:00 am 1. Entity Name CRAWFORD TECHNOLOGIES, INC. **Secretary of State** 07-18-2000 90016 012 \*\*\*150.00 Principal Place of Business Mailing Address 1713 61ST DRIVE SOUTH 1713 61ST DRIVE S. WEST PALM BEACH FL 33415-5438 WEST PALM BEACH FL 33415-5438 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0797952 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WINKEL, WILLIAM M ESQ. Street Address (P.O. Box Number is Not Acceptable) 2627 FOREST HILL BLVD. WEST PALM BEACH FL 33406 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) П 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Change ■ Addition TITLE ☐ Delete CRAWFORD, THOMAS N SR. NAME NAME 1713 61ST DRIVE SOUTH STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33415-5438 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE CRAWFORD, JOAN S NAME NAME 1713 61ST DRIVE S. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33415-5438 CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 13. I hereby certify that the information supplied with this filling 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.

561-964-3894

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## CRAWFORD TECHNOLOGIES, INC. 1713 61ST DRIVE SOUTH WEST PALM BEACH, FL 33415-5438 Telephone: 561/964-3894 Fax: 561/964-4055

July 10, 2000

Division of Corporations Uniform Business Report Filings P. O. Box 6327 Tallahassee, Florida 32314

Re: Corporate Report for Crawford Technologies, Inc. FEIN # 65-0797952

Dear Sir/Madam:

On Saturday, July 8, 2000, we received a 2000 UNIFORM BUSINESS REPORT FORM. The form was marked "SECOND NOTICE". Our office never received the first form, and today, July 10, 2000, I called your office and spoke with a gentleman named "Andy". Following his instructions we are paying the regular reporting fee of \$150.00 and attaching this letter.

Thank you for your assistance in this matter.

Joan S. Crawford