

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000096379

1. Entity Name

MED. TECH INDUSTRIES CORPORATION

FILED

May 15, 2000 8:00 am
Secretary of State

05-15-2000 90268 031 ***150.00

Principal Place of Business

Mailing Address

2027 SHERMAN ST
HOLLYWOOD FL 33020
US

2027 SHERMAN ST
HOLLYWOOD FL 33020-2126
US

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

NOT APPLICABLE

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

STANLEY, STEVE
450 PETERSBURG TER
PLANTATION FL 33325

Name

STEVE STANLEY

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

11700 N.W. 9 ST

City

PLANTATION

FL

Zip Code

33325

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

Steve Stanley, PRES

STEVE STANLEY, PRES.

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 ☐ Delete
NAME PACHIVAS, JOHN
STREET ADDRESS 287 NE 118 TER
CITY-ST-ZIP MIAMI FL 33160

TITLE C.E.O. ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME STANLEY, STEVE
STREET ADDRESS 450 PETERSBURG TER
CITY-ST-ZIP PLANTATION FL 33325

TITLE PRES. ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST ☐ Delete
NAME ANNIS, JOHN
STREET ADDRESS 15041 SW 13 PL
CITY-ST-ZIP SUNRISE FL 33326

TITLE VICE PRES, S.T. ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 another like empowered.

SIGNATURE:

Steve Stanley, PRES
STEVE STANLEY

Date

Daytime Phone #

4/28/00 3056876760

CR2E034 (9/99)