**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an a

SIGNATURE:

all other like empowered.

TED NAME OF SIGNING OFFICER OR DIRECTOR

## May 02, 2001 8:00 am Secretary of State DOCUMENT # P97000099801 1. Entity Name CARDIOTECH, INC. 05-02-2001 90041 045 \*\*\*150.00 Principal Place of Business Mailing Address 635 S ORANGE AVE 635 S ORANGE AVE C002119p **STE 10** STE 10 SARASOTA FL 34236 SARASOTA FL 34236 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0820327 Not Applicable Zip 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 Name PATTERSON, JOHN Street Address (P.O. Box Number is Not Acceptable) 46 N. WASHINGTON BLVD., #1 SARASOTA FL 34236 Zip Code City 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 \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition CR2E034 (10/00) TITLE DUPST Change □ Delete TITLE KERI NAKAMOTO PETRIK, GERD NAME NAME 904 S. TAMIAMITEAIL 635 S ORANGE AVE STE 10 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP OSPREN CITY-ST-ZIP SARASOTA FL 34236 ☐ Change Addition TITI F 🔽 Delete TITLE GEBHARD, UNDA NAME NAME 635 S ORANGE AVE STE 10 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34236 CITY-ST-ZIP DVPT TITLE-☐ Change ☐ Addition Delete TITLE GEBHARD, H DIETER NAME NAME 635 S ORANGE AVE STE 10 STREET ADDRESS STREET ADDRESS · 54 15 " CITY-ST-ZIP SARASOTA FL 34236 CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE 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 TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS 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 trust per expression block 11 or Block 12 if