2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000101902

1. Entity Name

STANDARD TECHNOLOGY INTERNATIONAL, INC.



FILED Feb 18, 2003 8:00 am Secretary of State

02-18-2003 90091 047 ***158.75

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Principal Place of Business 1643 BRICKELL AVENUE #1902 MIAMI FL 33129		Mailing Address 1643 BRICKELL AVENUE #1902 MIAMI FL 33129				1 (02 1) 10 1 (10 (02)) (02) (02)	i 2010) Hibii obibi siribi b	r iki ar ika kiro kari
2. Principal	Place of Business	3. Mailing Address	 .		_			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. F			Applied For	
Zip	Country	Zip	Country	/ - ====================================	5. (Certificate of Status Desired		Not Applicable
	6. Name and Address of Curren	· · · ·					Fee Requ	
TUNCAY, 1643 BRI #1902 MIAMI FL	CENK CKELL AVENUE	gun	L	Name Street Addres		lame and Address of New Reg	gistered Agent	
	named entity submits this statement fi ions of registered agent.			City office or regis	stered age	nt, or both, in the State of Florid	Zip Co	
	Signature, typed or printed name of registered agen	and title if applicable. (NO	TE: Registered Ag	ent signature requ	ired when rein	istating)	DATE	
After Make Check	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of					9. Election Campaign Financ Trust Fund Contribution.	cing _ \$5.	00 May Be
10.	OFFICERS AND	DIRECTORS	11,		ADD	OITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 11
NAME STREET ADDRESS CITY-ST-ZIP	D TUNCAY, CENK 1643 BRICKELL AVENUE, #1902 MIAMI FL 33129	Delete	TITLE NAME STREET AC CITY-ST-				☐ Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET AD CITY-ST-2			a Ta white topper as	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET AD CITY-ST-Z				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADE CITY-ST-Z				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI				☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	rtify that the information supplied with	□ Delete	TITLE NAME STREET ADD CITY-ST-ZIE	- 1		·	☐ Change	Addition

12 does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if indicated on this report or supplier intal report is true and of the corporation or the receiver pritrustee empowered trustee em an addres changed, or on an attachment w

SIGNATURE: