2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATUR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # **P98000002026** Mar 02, 2000 8:00 am Secretary of State FPTA TECHNOLOGIES, INC. 03-02-2000 90127 028 ***150.00 Principal Place of Business Mailing Address 125 S GADSDEN STREET 125 S GADSDEN STREET STF 200 STE 200 TALLAHASSEE FL 32301 TALLAHASSEE FL 32301-1525 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 59-3508330 Not Applicable Zip 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 GREEN, ANGELA B Street Address (P.O. Box Number is Not Acceptable) 125 S GADSDEN STREET STE 200 TALLAHASSEE FL 32301 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 \$150.00 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 MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DST ☐ Change ☐ Addition Delete TITLE TITLE GREEN, ANGELA B NAME NAME STREET ADDRESS 1255 GADSDEN ST, STE 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32301 Addition ☐ Change Delete TITLE NORRIS, LANCE NAME 125 S GADSDEN ST, STE 200 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF TALLAHASSEE FL 32301 CITY-ST-ZIP Change ■ Addition □ Delete MEZRAH, ALLAN NAME 2011 W. CLEVELAND ST., STE A STREET ADDRESS STREET ADDRESS CITY-ST-ZIE TAMPA FL 33606 CITY-ST-ZiP Addition TITLE Delete TITLE MINIACI. AL JR NAME NAME 1411 S.W. 31ST AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF POMPANO BCH FL 33069 ☐ Delete ☐ Change ☐ Addition TITLE TITLE HARVEY, LIN NAME NAME 1001 LAKESIDE AVE., 7TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **CLEVELAND OH 44114-1195** Addition Change TITLE □ Delete TITLE DUPILKA, GREG 5447 CENTER STREET NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P 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 the 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 attack helphysia, a vadyress, with all other like empowered. changed, or on a