

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90479 035 ***158.75

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1. Entity Name

SELTECH ASSOCIATES, INC.



Principal Place of Business

11161 HERON BAY BLVD

#4316

CORAL SPRINGS FL 33076

Mailing Address

11161 HERON BAY BLVD

#4316

CORAL SPRINGS FL 33076

11003416



2. Principal Place of Business

5350 Grand Banks Blvd

3. Mailing Address

5350 Grand Banks Blvd

Suite, Apt. #, etc.

Greenacres

Suite, Apt. #, etc.

Greenacres

City & State

FL

City & State

FL

Zip

33463

Country

Zip

33463

Country

4. FEI Number

65-8004344

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

ROBILLO, JOE

109 NW 118 DR

CORAL SPRINGS FL 33071

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

NAME ROBILLO, JOE

STREET ADDRESS 109 NW 118 D

CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☐ Delete

NAME ROBILLO, JOHN

STREET ADDRESS 11161 HERON BAY BLVD

CITY-ST-ZIP CORAL SPRINGS FL 33076

TITLE ☐ Delete

NAME ROBILLO, DARLENE

STREET ADDRESS 11161 HERON BAY BLVD

CITY-ST-ZIP CORAL SPRINGS FL 33076

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

5350 Grand Banks Blvd

Greenacres FL 33463

TITLE ☒ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

5350 Grand Banks Blvd

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TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joe Robillo **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/03

Date

541-966-2106

Daytime Phone #

CR2E034 (10/02)