

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000033154

1. Entity Name

ARENA TECHNOLOGIES, INC.

**FILED**  
**Apr 18, 2000 8:00 am**  
**Secretary of State**

04-18-2000 90057 008 \*\*\*158.75

Principal Place of Business

936 INTRACOSTAL DR #607  
FORT LAUDERDALE FL 33304  
US

Mailing Address

936 INTRACOSTAL DR #607  
FORT LAUDERDALE FL 33304-3632  
US

2. Principal Place of Business

3. Mailing Address

PO Box 1585

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Ft. Lauderdale, FL

Zip

Country

33302

USA

4. FEI Number

65-0831030

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

PYE, THOMAS G  
2787 E OAKLAND PARK BLVD, STE 301  
FORT LAUDERDALE FL 33018

Name

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

City

FL

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

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 | NAME              | STREET ADDRESS      | CITY-ST-ZIP              | <input type="checkbox"/> Delete     | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
|-------|-------------------|---------------------|--------------------------|-------------------------------------|-------|------|----------------|-------------|---------------------------------|-----------------------------------|
| PD    | DILLON, JEFFREY   | 936 INTRACOASTAL DR | FORT LAUDERDALE FL 33304 | <input type="checkbox"/>            |       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |
| VP    | STRICKLAND, RANDY | 301 NW 93RD AVE     | CORAL SPRINGS FL 33071   | <input checked="" type="checkbox"/> |       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |
|       |                   |                     |                          | <input type="checkbox"/>            |       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |
|       |                   |                     |                          | <input type="checkbox"/>            |       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |
|       |                   |                     |                          | <input type="checkbox"/>            |       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |
|       |                   |                     |                          | <input type="checkbox"/>            |       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |
|       |                   |                     |                          | <input type="checkbox"/>            |       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |
|       |                   |                     |                          | <input type="checkbox"/>            |       |      |                |             | <input type="checkbox"/>        | <input type="checkbox"/>          |

~~Secretary~~ ☐ Change ☒ Addition  
Jose Herrera  
2401 SW 31st Ave #A-4  
Pembroke Park, FL 33009

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/00 954-522-4643

Date

Daytime Phone #

CR2E034 (9/99)