FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Sep 06, 2001 8:00 am Secretary of State DOCUMENT # P98000049559 1. Entity Name 09-06-2001 90264 002 ***550.00 3-TEK, INC. Mailing Address Principal Place of Business 9775 RICHMOND CIRCLE 9775 RICHMOND CIRCLE **BOCA RATON FL 33434 BOCA RATON FL 33434** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE - City & State Applied For City & State 4. FEI Number 65-0833451 Not Applicable Zip Country Country Zip \$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 FUNDAK, RONALD J 9775 RICHMOND CIRCLE Richmond (**BOCA RATON FL 33434** Zip Code 33434 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 FILE NOW!!! FEE IS \$550.00 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 September 12, 2001 Fee will be \$750.00 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 TITLE PTD ☐ Delete TITLE Change ☐ Addition PICON, RAFAEL J NAME NAME STREET ADDRESS 9775 RICHMOND CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33434** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME FUNDAK, RONALD J NAME STREET ADDRESS 9775 RICHMOND CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33434** TITLE ☐ Delete TITLE Change Addition SD NAME NAME Font, gary p STREET ADDRESS 9775 RICHMOND CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA RATON FL 33434 ☐ Delete Change ☐ Addition TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition TITI F 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 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.

Rafael J. Picon 8-29-01