2001 UNIFORM BUSINESS REPORT (UBR)

01-24-2002 90137 001 ***750.00
01-24-2002 90137 002 ***150.00
P98000105150
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 JAN 30 AM 10:26

10286

REINSTATEMENT 01-02

DO NOT WRITE IN THIS SPACE

DOCUMENT # P98000105150

1. Entity Name
EDGETEC INTERNATIONAL INC.

Principal Place of Business	Mailing Address
6231 BENT PINE DRIVE STE #514A ORLANDO FL 32822	6231 BENT PINE DRIVE STE #514A ORLANDO FL 32822

2. Principal Place of Business	3. Mailing Address
285 W. CENTRAL PARKWAY	P.O. Box 160910.
Suite, Apt. #, etc. 1710.	Suite, Apt. #, etc.
City & State ALTAMONTE SPRINGS FL.	City & State ALTAMONTE SPRINGS, FL
Zip 32714. Country USA.	Zip 32716-0910 Country USA.

4. FEI Number 59-3593393 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BLOSS, REGAN B
6231 BENT PINE DR
SUITE 514A
ORLANDO FL 32822

7. Name and Address of New Registered Agent

Name A.G. BUCKLAND
Street Address (P.O. Box Number is Not Acceptable) 285 W. CENTRAL PARKWAY
SUITE 1710
City ALTAMONTE SPRINGS FL Zip Code 32714-2579

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 A.G. BUCKLAND 12-10-01.
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 $550.00
After September 12, 2001 Fee will be $750.00
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	PD BLOSS, REGAN B 6231 BENT PINE DR #514A ORLANDO FL 32822	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	COO. A.G. BUCKLAND 285 W. CENTRAL PARKWAY #1710 ALTAMONTE SPRINGS 32714	☑ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (5/01)

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.

A.G. BUCKLAND.

SIGNATURE: SIGNATURE REQUIRED BLOSS. 12-10-01. 407-788-9611.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #