## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## **FILED** DOCUMENT # **P99000005294** Mar 13, 2000 8:00 am **Secretary of State** R2 INNOVATIVE TECHNOLOGIES, INC. 03-13-2000 90069 042 \*\*\*150.00 Principal Place of Business Mailing Address 160 SW 12 AVENUE #101B 160 SW 12 AVENUE #101B DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442-3114 3. Mailing Address 2. Principal Place of Business c/o Alan J. Werksman, Esq. c/o Alan J. Werksman, Esq. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 160 SW 12 AVenue #101B 160 SW 12 Avenue #101B City & State Deerfield Beach, FL 33442, 4. FEI Number 65-0888120 Applied For City & State Deerfield Beach, FL 33442 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WERKSMAN, ALAN J Street Address (P.O. Box Number is Not Acceptable) 160 SW 12 AVENUE #101B **DEERFIELD BEACH FL 33442** 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Change Addition TITLE TITLE □ Delete SCHOENFELD, RICH NAME NAME 1111 NORTHUMBERLAND COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WELLINGTON FL 33414 CITY-ST-7IP Change Addition ☐ Delete TITLE D/P NAME R.OBERT. RODGERS STREET ADDRESS STREET ADDRESS 2630 Bedford Mews Drive CITY-ST-ZIP CITY-ST-ZIP Wellington, FL 33414 Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS 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

3-7-00