

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 30, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P99000010495**1. Entity Name  
**TECHSTAR CORPORATION****Principal Place of Business**

6245 N. FED HWY, 3RD FLOOR

FT. LAUDERDALE  
33308

FL

**Mailing Address**

6245 N. FED HWY, 3RD FLOOR

FT. LAUDERDALE  
33308

FL

2. Principal Place of Business  
3200 NORTH UNIVERSITY DRIVE3. Mailing Address  
3200 NORTH UNIVERSITY DRIVESuite, Apt. #, etc.  
SUITE 210Suite, Apt. #, etc.  
SUITE 210City & State  
CORAL SPRINGS

FL

City & State  
CORAL SPRINGS

FL

Zip  
33065

Country

Zip  
33065

Country

4. FEI Number  
**65-0892639**

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent****BURGESS JOSEPH L**  
6245 N. FED HWY, 3RD FLOORFT. LAUDERDALE  
33308

FL

**7. Name and Address of New Registered Agent**

Name

**BURGESS JOSEPH L**Street Address (P.O. Box Number is Not Acceptable)  
3200 NORTH UNIVERSITY DRIVE

SUITE 210

City  
CORAL SPRINGS

FL

Zip Code  
33065

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 **JOSEPH L BURGESS****04/30/2001**

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, 2001 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**

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete
NAME	BURGESS JOSEPH L	
STREET ADDRESS	6245 N. FED HWY, 3RD FLOOR	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PRIVITERE BOB	
STREET ADDRESS	3200 NORTH UNIVERSITY DRIVE, #210	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STOKES WYLIE	
STREET ADDRESS	2601 SW 31 AVENUE	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	D/CH	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURGESS JOSEPH L	
STREET ADDRESS	3200 NORTH UNIVERSITY DRIVE, #210	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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 changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: Joseph L Burgess**

Chrm 04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)