2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State
04-14-2003 90228 008 ***150.00

DOCUMENT # P99000020894

Entity Name
ALLTECH ELECTRONICS, INC.

Principal Place of Business	Mailing Address
~~800 ORANGE VISTA BLVD~~ ~~KISSIMMEE FL 34746~~	~~1060 ORANGE VISTA BLVD~~ ~~KISSIMMEE FL 34746~~

2. Principal Place of Business	3. Mailing Address
223 S. JOHN YOUNG PKWY	223 SOUTH JOHN YOUNG PKWY
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: KISSIMMEE, FL	City & State: KISSIMMEE FL.
Zip: 34741 Country: USA	Zip: 34741 Country: USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-0911425 ☐ 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
~~GUERRERO, WALTON~~ ~~% WALTON GUERRERO~~ ~~5365 DAHLIA RESERVE DR~~ ~~KISSIMMEE FL 34758~~	Name: GUERRERO WALTON Street Address (P.O. Box Number is Not Acceptable): 223 SOUTH JOHN YOUNG PKWY City: KISSIMMEE FL Zip Code: 34741

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Alison Guerrero 4-2-3
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GUERRERO, WALTON ~~5365 DAHLIA RESERVE DR~~ ~~KISSIMMEE FL 34758~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT GUERRERO WALTON 223 SOUTH JOHN YOUNG PKWY KISSIMMEE FL. 34741	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GUERRERO, ALISON C ~~5365 DAHLIA RESERVE DR~~ ~~KISSIMMEE FL 34758~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR GUERRERO ALISON 223 SOUTH JOHN YOUNG PKWY KISSIMMEE FL 34741	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT WARDLAW DANIEL 223 SOUTH JOHN YOUNG PKWY KISSIMMEE FL, 34741	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR WARDLAW TRACY 223 SOUTH JOHN YOUNG PKWY KISSIMMEE FL 34741	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Alison Guerrero 4-2-3
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)