

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000034611

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: 2000-X TECHNOLOGIES, INC.

Current Principal Place of Business:

1242 NORTH FAIRWAY DRIVE
APOPKA, FL 32712

New Principal Place of Business:

301 EAST PINE STREET
SUITE 150
ORLANDO, FL 32801 US

Current Mailing Address:

PO BOX 560328
ORLANDO, FL 328560328 US

New Mailing Address:

301 EAST PINE STREET
SUITE 150
ORLANDO, FL 32801 US

FEI Number: 59-3588536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GONZALEZ, ALBERTO G MR
P.O. BOX 560328
ORLANDO, FL 32856 US

Name and Address of New Registered Agent:

GONZALEZ, ALBERTO G MR
1242 NORTH FAIRWAY DRIVE
APOPKA, FL 32712 US

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: ALBERTO G. GONZALEZ

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPSD () Delete
Name: SAYA, EDGAR O MR
Address: 1633 S. EOLA DR.
City-St-Zip: ORLANDO, FL 32806

Title: CTD () Delete
Name: CARRION, CATALINA S MS
Address: P.O. BOX 560328
City-St-Zip: ORLANDO, FL 328560328 US

Title: PD () Delete
Name: GONZALEZ, ALBERTO G
Address: P.O. BOX 560328
City-St-Zip: ORLANDO, FL 328560328 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CTD (X) Change () Addition
Name: CARRION, CATALINA S MS
Address: 1242 NORTH FAIRWAY DR
City-St-Zip: APOPKA, FL 32712 US

Title: PD (X) Change () Addition
Name: GONZALEZ, ALBERTO G
Address: 301 EAST PINE STREET
City-St-Zip: ORLANDO, FL 32801 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERTO G. GONZALEZ

D

04/30/2002

Electronic Signature of Signing Officer or Director

Date