

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90867 015 ***150.00

03030303 AV

DOCUMENT # P99000039652

1. Entity Name
AFERTECH, INC.



Principal Place of Business
**727 NE 3 AVENUE
SUITE 200
FT LAUDERDALE FL 33004**

Mailing Address
**727 NE 3 AVENUE
SUITE 200
FT LAUDERDALE FL 33004**

2. Principal Place of Business

3. Mailing Address

P.O. Box: 1153

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
DANIA BEACH, FL

4. FEI Number **65-0915473**

Applied For
Not Applicable

Zip

Country

Zip
33004

Country
USA

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

**ERTAN, MEHMET T
727 NE 3 AVENUE #200
FORT LAUDERDALE FL 33304**

Name **MEHMET T. ERTAN**

Street Address (P.O. Box Number is Not Acceptable)

727 NE 3rd AVENUE Suite: 200

City **Fort Lauderdale FL** Zip Code **33304**

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

Mehmet T. Ertan

02/27/2003

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 **P** ☐ Delete
NAME **ERTAN, MEHMET T**
STREET ADDRESS **727 NE 3RD AVENUE SUITE 200**
CITY-ST-ZIP **FORT LAUDERDALE FL 33304**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **ERTAN, TANER**
STREET ADDRESS **727 NE 3RD AVENUE SUITE 200**
CITY-ST-ZIP **FORT LAUDERDALE FL 33304**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Mehmet T. Ertan
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/27/2003 (954) 523-2425

Date

Daytime Phone #

CR2E034 (10/02)