2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 06, 2001 8:00 am Secretary of State DOCUMENT # **P99000059413** GENTRIQS, INC. 03-06-2001 90355 014 ***158.75 Mailing Address Principal Place of Business 5401 W KENNEDY BLVD 5401 W KENNEDY BLVD SUITE 890 SUITE 890 TAMPA FL 33604 TAMPA FL 33604 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-3588101 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION FL 33324 Zip Code City 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, 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 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Atter MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (10/00) ☐ Addition Change TITLE PD □ Delete TITLE くり Lystrup, Tue NAME NAME LYSTRUD. TUE 5401 W Konnedy BIVE STREET ADDRESS STREET ADDRESS 5401 W KENNEDY BLVD CITY-ST-ZIP CITY-ST-ZIP Tumpa TAMPA FL 33604 Change ☐ Addition TITLE ☐ Delete TITLE NAME Thunell, Mats NAME THUNELL, MATS 5401 W Kennedy BIVAL Tampa FL 33609 STREET ADDRESS STREET ADDRESS HAUPSTRUSSE 60 CITY-ST-ZIP CITY-ST-ZIP D-65344 EITVILLE, GERMANY Change ☐ Addition ☐ Delete TITLE TITLE D۷ Thunell, Annika NAME NAME THUNELL, ANNILLU 5401 W Kennedy Bird STREET ADDRESS STREET ADDRESS HAUPSTRUSSE 60 CITY-ST-ZIP CITY-ST-ZIP Tuyon FL 33609 D-65344 EITVILLE, GERMANY ☐ Addition ☐ Delete TITLE TO Change TITLE TD NAME Daniel Gens, Daniel Hauptstrasse 60 NAME GERIS, DANIEL STREET ADDRESS STREET ADDRESS **HAUPSTRUSSE 60** CITY-ST-ZIP CITY-ST-ZIP D-65344 FITVILLE GERMUNO D-65344 EITVILLE, GERMANY TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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:

MANUAL TURE LYSTYLY SMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

3/1-2001

813 707 8911

Daytime Phone #