

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000061831

1. Entity Name

SOUTHERN TECHNOLOGIES INTERNATIONAL, INC.

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90038 018 ***150.00

Principal Place of Business

Mailing Address

1749 EAST HALLANDALE BEACH BOULEVARD #124
 HALLANDALE FL 33009

1749 EAST HALLANDALE BEACH BOULEVARD #124
 HALLANDALE FL 33009-4680

2. Principal Place of Business

833 Crestview Circle

3. Mailing Address

833 Crestview Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Weston, FL

City & State

Weston, FL

4. FEI Number

65-0933046

Applied For

Not Applicable

Zip

33327

Country

USA

Zip

33327

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

PAWLICKI, NATHAN

1749 EAST HALLANDALE BEACH BOULEVARD #124
 HALLANDALE FL 33009

Name

Carolyn S. Krimer

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

833 Crestview Circle

City

Weston

FL

Zip Code

33327

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

Carolyn S. Krimer

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/26/2000

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME D
 STREET ADDRESS PAWLICKI, NATHAN
 CITY-ST-ZIP 1749 EAST HALLANDALE BEACH BOULEVARD #124
 HALLANDALE FL 33009

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

TITLE ☐ Delete
 NAME D
 STREET ADDRESS KRIMER, CAROLYN SUE
 CITY-ST-ZIP 833 CRESTVIEW CIRCLE
 WESTON FL 33327

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

TITLE ☐ Delete
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 CITY-ST-ZIP

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TITLE ☐ Change ☐ 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: *Carolyn S. Krimer* **CAROLYN S. Krimer Sec-Treas.** 3/26/2000 954-385-4990
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)