

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2000 8:00 am
Secretary of State

03-25-2000 90013 045 ***150.00

DOCUMENT # P99000062590

1. Entity Name

HAITEK INSTRUMENTS, INC.

Principal Place of Business

Mailing Address

3501 S.W.8TH ST.
 #207
 MIAMI FL 33135

3501 S.W.8TH ST.
 #207
 MIAMI FL 33135-4139

2. Principal Place of Business

745 SW 35 St ~~Ste 201~~

3. Mailing Address

745 SW 35 St ~~Ste 201~~

(Suite) Apt. #, etc.
 201

(Suite) Apt. #, etc.
 201

City & State
 MIAMI, FL

City & State
 MIAMI, FL

4. FEI Number

Applied For
 Not Applicable

Zip
 33135-4141

Country

Zip
 33135-4141

Country

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

GERZVOLF, GABRIEL
 1925 BRICKELL AVE.
 #D-1610
 MIAMI FL 33129

Name
 GABRIEL GERZVOLF

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

11326 NW 50 TERR

City
 MIAMI

FL

Zip Code
 33178-3542

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

[Handwritten Signature]

03/21/2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

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 PD Delete
 NAME GERZVOLF, CARINA
 STREET ADDRESS 3501 S.W.8TH ST. #207
 CITY-ST-ZIP MIAMI FL 33135

TITLE PD Change Addition
 NAME GERZVOLF, CARINA
 STREET ADDRESS 745 SW 35 ST STE 201
 CITY-ST-ZIP MIAMI-FL-33135-4141

TITLE VD Delete
 NAME MIERES, ROBERTO
 STREET ADDRESS 3501 S.W.8TH ST. #207
 CITY-ST-ZIP MIAMI FL 33135

TITLE VD Change Addition
 NAME MIERES, ROBERTO
 STREET ADDRESS 745 SW 35 ST STE 201
 CITY-ST-ZIP MIAMI-FL-33135-4141

TITLE TD Delete
 NAME GARZVOLF, GABRIEL
 STREET ADDRESS 1925 BRICKELL AVE #D-1610
 CITY-ST-ZIP MIAMI FL 33129

TITLE TD Change Addition
 NAME GERZVOLF, GABRIEL
 STREET ADDRESS 11326 NW 50 TERR
 CITY-ST-ZIP MIAMI-FL-33178-3542

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

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:

[Handwritten Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/21/2000

Date

305-468-1860

Daytime Phone #