2001 UNIFORM BUSINESS REPORT (UBR)

Secretary of State DOCUMENT # P99000072574 07-13-2001 90006 029 ***150.00 MEDICTEC LSI INC. Mailing Address Principal Place of Business 18620 W. OAKMONT DR 18267 NW 68 AVE. MIAMI FL 33015 HIALEAH FL 33015 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0941709 Not Applicable \$8.75 Additional Zip Country 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 BRITO, MARIA C Street Address (P.O. Box Number is Not Acceptable) 18267 NW 68 AVE **MIAMI FL 33015** 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 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filling requirement and elects to do so. Atter MAY 1, 2001 Fee will be \$550.00 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 11. OFFICERS AND DIRECTORS CR2E034 (10/00) PTD Delete Chance ☐ Addition TITLE TITLE BRITO, MARIA C NAME NAME STREET ADDRESS 18267 NW 68 AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33015 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition MLE ☐ Delete TITLE ina<u>m</u>e NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition 3 NAME NAME . 4 6 3 STREET ADORESS 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 eath; 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 all address, with all other like empowered. SIGNATURE: ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone

FILED

Jul 31, 2001 8:00 am

Attechnents

July:9th, ¹2001

Division Of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE-Document # P99000072574-

In reference to the document number listed above I apologize for the late return. I was visiting my sister in Uruguay, South America, when I returned to find these documents were already due. I have completed the information requested and have sent them back as requested. Please contact me if there is anything else pending. Thank you for your patience with this matter.

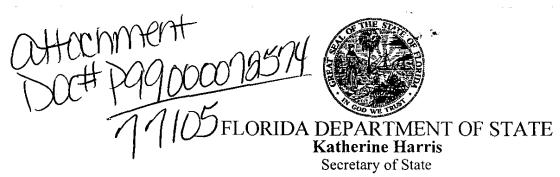
Sincerely,

Maria C. Brito

18267 NW 68th Avenue

Miami, FL 33015

2000 86 x 20 1 12 1 16



July 13, 2001

MEDICTEC LSI INC. 18620 W. OAKMONT DR HIALEAH, FL 33015

Subject: MEDICTEC LSI INC.

Reference P99000072574 Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/SG ANNUAL REPORTS SECTION