

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
 05-27-2002 90278 025 ***150.00

DOCUMENT # P99000096482

1. Entity Name

ITEQ CORP.

Principal Place of Business

11021 NW FIRST STREET
 PLANTATION FL 33324

Mailing Address

11021 NW FIRST STREET
 PLANTATION FL 33324

2. Principal Place of Business

1802 N University Dr.

3. Mailing Address

1802 N University Dr.

Suite, Apt. #, etc.

203 J

Suite, Apt. #, etc.

203 J

City & State

Plantation

City & State

Plantation

Zip

33322

Country

USA

Zip

33322

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0985479

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

AUERBACH, JAY E
 KHANI & AUERBACH, ESQ.
 338 HOLLYWOOD BLVD.
 HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name: Robert Slatoff
 Street Address (P.O. Box Number is Not Acceptable): Frank, Weinberg & Black
 7805 SW 6th Ct.
 City: Plantation FL Zip Code: 33324

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

5/1/02

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, 2002 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

TITLE: P
 NAME: MASSOP, ASHA
 STREET ADDRESS: 11021 NW 1ST STREET
 CITY-ST-ZIP: PLANTATION FL 33324 ☐ Delete

TITLE: ☐ Delete
 NAME: ☐ Delete
 STREET ADDRESS: ☐ Delete
 CITY-ST-ZIP: ☐ Delete

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 STREET ADDRESS: ☐ Delete
 CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: VP
 NAME: Noygel Massop
 STREET ADDRESS: 1802 N University Dr. 203 J
 CITY-ST-ZIP: Plantation FL 33322 ☐ Change ☒ Addition

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

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

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:

Asha Massop 5/1/02

954-476-2353

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)