

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90149 005 ***150.00

0486186 AV

DOCUMENT # P99000100371

1. Entity Name
KNOW-HOW SYSTEMS, INC.



Principal Place of Business
**1318 NELSON AVE
CLEARWATER FL 33755**

Mailing Address
**1318 NELSON AVE
CLEARWATER FL 33755**

2. Principal Place of Business

**611 DAVID RD
Suite, Apt. #, etc.
403**

3. Mailing Address

**275 W. STOCKER ST
Suite, Apt. #, etc.
APT 2**

City & State

CLEARWATER FL

City & State

GLENDALVE CA

Zip

33756

Country

USA

Zip

91202

Country

USA

4. FEI Number

59-3609076

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**GREENBERG, MARTIN
1318 NELSON AVE
CLEARWATER FL 33755**

7. Name and Address of New Registered Agent

Name

KATHLEEN LETAU

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

611 DRUID RD #403

City

CLEARWATER

FL

Zip Code

33756

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Kathleen E Letau

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

(NOTE: Registered Agent signature required when reinstating)

4-28-03

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **GREENBERG, MARTIN**
STREET ADDRESS **1318 NELSON AVE**
CITY-ST-ZIP **CLEARWATER FL 33755**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **TREASURER** ☒ Change ☐ Addition
NAME **MARTIN GREENBERG**
STREET ADDRESS **257 W. STOCKER ST. APT 2**
CITY-ST-ZIP **GLENDALVE, CA 91202**

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Martin Greenberg

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M. GREENBERG

Date

4/25/03

Daytime Phone #

8182448071

CR2E034 (10/02)