2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jun 03, 2002 8:00 am Secretary of State

1. Entity Na SAUNDI		# S36 NEERING COR	_			06-03-20	02 91188 025	
Principal Place of Business 4100 N. POWERLINE RD #X2 POMPANO BEACH FL 33073		(2	Mailing Address 4100 N. POWERLINE RD #X2 POMPANO BEACH FL 33073			1 78 3 12410 200 1111 0 3 2211 23810 11101	ee n 2 200 2000 aan	M etr ij brom (es i
2. Principal	Place of Busine	988	3. Mailing Address					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & Sta	ete		City & State		4.	FEI Number 65-0264167		Applied For Not Applicable
Žip		Country	Zip	Country	5.	Certificate of Status Desired	□ \$8.75 A Fee Requi	dditional
	6. Name s	and Address of Curr	ent Registered Agent		7.	Name and Address of New Reg	Istered Agent	
POPKIN'	& SHURPIN,	PA		Name			روب ماند مناسب مار المراجع مارا	ه معدد سد
	ADES ROAD	· • • • • • • • • • • • • • • • • • • •		Street Ad	dress (P.O.	Box Number is Not Acceptable)		
SUITE 11	~					•	·	
	ATON FL 334	31			<u>.</u>			
		<u> </u>		City		•	FL Zip Co	de
8. The above SIGNATURE			nt for the purpose of changing its					
9. This corp Tax filing (See crite	Signature, typed or oration is eligib	printed name of registered at le to satisfy its intanged d elects to do so.	pent and title it equivable. (NOT ible FILE NOW After May 1, 20 Make Check Payal	IE: Registered Agent signeture III FEE IS \$150.00 02 Fee will be \$550 Die to Department of	required when o		DATE	OO May Be d to Fees
9. This corp Tax filing (See crite	Signature, typed or oration is eligib requirement an tria on back)	printed name of registered at le to satisfy its intanged d elects to do so.	ible FILE NOW. After May 1, 20 Make Check Payat	E: Registered Agent signature III FEE IS \$150.00 02 Fee Will be \$55	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Sing \$5.0	d to Fees
9. This corp Tax filing (See crite 11.	Signature, typed or oration is eligib requirement an	printed name of registered at le to satisfy its intange d elects to do so. OFFICERS AI H, USA D. WERLINE RD	pent and title it equivable. (NOT ible FILE NOW After May 1, 20 Make Check Payal	III FEE IS \$150.00 02 Fee will be \$55 ble to Department of	required when one of the control of	einstating) 10. Election Campaign Finance	DATE Sing \$5.0	d to Fees
9. This corp Tax filing (See crite 11. TITLE NAME STREET ADDRESS	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	ible FILE NOW. After May 1, 20 Make Check Payat	III FEE IS \$150.00 02 Fee will be \$550 ble to Department of 12. TITLE NAME STREET ADDRESS	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Sing \$5.0 Adde	d to Fees
9. This corp Tax filing (See crite 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL	ible FILE NOW After May 1, 20 Make Check Payat ND DIRECTORS	IE: Registered Agent eignenture III FEE IS \$150.00 02 Fee will be \$550 ble to Department of 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Ding \$5.0 Adde RS AND DIRECTOR Change	d to Fees IS IN 11 Addition Addition
9. This corp Tax filing (See crite 11. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE AMME ITILE AMME	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pent and little if applicable (NOT ible FILE NOW After May 1, 20 Make Check Payat ND DIRECTORS Delete	ILI FEE IS \$150.00 12 Fee will be \$550 12. 11/1 FIE IS \$150.00 12. 11/1 ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Cing \$5.0 Adde RS AND DIRECTOR Change	d to Fees
9. This corp Tax filing (See crite 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE INAME THEET ADDRESS TREET ADDRESS	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pent and little if applicable (NOT ible FILE NOW After May 1, 20 Make Check Payat ND DIRECTORS Delete	III FEE IS \$150.00 02 Fee will be \$550 04 Fee will be \$550 05 to Department of 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Cing \$5.0 Adde RS AND DIRECTOR Change	d to Fees IS IN 11 Addition Addition
9. This corp Tax filing (See crite 11. ITILE NAME STREET ADDRESS CITY-ST-ZIP ITILE MAME STREET ADDRESS CITY-ST-ZIP ITILE MAME MAME MAME MAME MAME MAME MAME MA	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pent and little if applicable (NOT ible FILE NOW After May 1, 20 Make Check Payat ND DIRECTORS Delete	IE: Registered Agent signeture III FEE IS \$150.00 02 Fee will be \$550 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Cing \$5.0 Adde RS AND DIRECTOR Change	d to Fees IS IN 11 Addition Addition
9. This corp Tax filing (See crite 11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS LITY-ST-ZIP TITLE NAME STREET ADDRESS LITY-ST-ZIP TITLE AME AME AME AME	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pant and title il applicable. (NOI ible FILE NOW After May 1, 20 Make Check Payat ND DIRECTORS Delete Delete Delete	ITE: Registered Agent signeture ITE: FEE IS \$150.00 O2 Fee will be \$55 Sie to Department of 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS TITLE NAME	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Cing \$5.0 Adde RS AND DIRECTOR Change Change	d to Fees IS IN 11 Addition Addition
9. This corp Tax filing (See crite 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME LITEET ADDRESS LITY-ST-ZIP LITEET ADDRESS	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pant and title il applicable. (NOI ible FILE NOW After May 1, 20 Make Check Payat ND DIRECTORS Delete Delete Delete	IE: Registered Agent eigneture I!! FEE IS \$150.00 02 Fee will be \$55 Sile to Department of 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Cing \$5.0 Adde RS AND DIRECTOR Change Change	d to Fees IS IN 11 Addition Addition
9. This corp Tax filing (See crite 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TIT	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pent and little il applicable. (NOI dible FILE NOW After May 1, 20 Make Check Payat ND DIRECTORS Delete Delete Delete	ILI FEE IS \$150.00 02 Fee will be \$550 01 to Department of 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Change Change Change	d to Fees IS IN 11 Addition Addition Addition
9. This corp Tax filing (See crite 11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE IAME ITREET ADDRESS ITY-ST-ZIP TITLE IAME ITREET ADDRESS ITY-ST-ZIP TITLE IAME IREET ADDRESS ITY-ST-ZIP TITLE IAME IREET ADDRESS ITY-ST-ZIP TITLE IREET ADDRESS ITY-ST-ZIP TITLE AME	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pant and title il applicable. (NOI ible FILE NOW After May 1, 20 Make Check Payat ND DIRECTORS Delete Delete Delete	IE: Registered Agent eigneture I!! FEE IS \$150.00 02 Fee will be \$55 Sile to Department of 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Cing \$5.0 Adde RS AND DIRECTOR Change Change	d to Fees IS IN 11 Addition Addition
9. This corp Tax filing (See crite 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TIT	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pent and little il applicable. (NOI dible FILE NOW After May 1, 20 Make Check Payat ND DIRECTORS Delete Delete Delete	ILI FEE IS \$150.00 12 Fee will be \$550 12 TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Change Change Change	d to Fees IS IN 11 Addition Addition Addition
9. This corp Tax filing (See crite 11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS LITY-ST-ZIP TITLE NAME ITHEET ADDRESS LITY-ST-ZIP TITLE AME TREET ADDRESS LITY-ST-ZIP TITLE AME TREET ADDRESS LITY-ST-ZIP TITLE TREET ADDRESS LITY-ST-ZIP TITLE TREET ADDRESS LITY-ST-ZIP TREET ADDRESS LITY-ST-ZIP	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pent and little if applicables (NO) Ibile	I!! FEE IS \$150.00 02 Fee will be \$550 01 to Department of 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Change Change Change Change	d to Fees IS IN 11 Addition Addition Addition
9. This corp Tax filing (See crite 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TIT	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pent and little il applicable. (NOI dible FILE NOW After May 1, 20 Make Check Payat ND DIRECTORS Delete Delete Delete	ILI FEE IS \$150.00 12 Fee will be \$550 12 TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Change Change Change	d to Fees IS IN 11 Addition Addition Addition
9. This corp Tax filing (See crite 11. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS LITY-ST-ZIP TITLE NAME ITHEET ADDRESS ITY-ST-ZIP TITLE AME ITHEET ADDRESS ITY-ST-ZIP TITLE AME TREET ADDRESS ITY-ST-ZIP TITLE AME TREET ADDRESS ITY-ST-ZIP TITLE TREET ADDRESS ITY-ST-ZIP TITLE TREET ADDRESS ITY-ST-ZIP TITLE TREET ADDRESS ITY-ST-ZIP TITLE	Signature, typed or oration is eligib requirement an iria on back) VS MAULTASCI 4100 N POV POMPANO I PT MAULTASCI 4100 N POV	printed name of registered as le to satisfy its Intange d elects to do so. OFFICERS AT H, USA D. MERLINE RD BEACH FL H, CARY J VERLINE RD	pent and little if applicables (NO) Ibile	ILI FEE IS \$150.00 02 Fee will be \$550 01 to Department of 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	required when one of the control of	10. Election Campaign Financ Trust Fund Contribution.	DATE Change Change Change Change	d to Fees IS IN 11 Addition Addition Addition