

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CONFESSION
AND THE STATE

1995



U.S. DEPARTMENT OF STATE
Washington, D.C. 20520
Office of the Secretary
Room 5600
Tel. 202-646-6000
Fax 202-646-6000

APPROVED
AND
FILED

95 JUL 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S58203**

(8)

PROMPT TECH MANAGEMENT, INC.

3902 NW 167TH ST. MIAMI FL 33160 US		3902 NW 167TH ST MIAMI FL 33054 US		DATE OF BIRTH OF THIS SPARTAN 06/05/1991		DATE OF LAST REPORT 07/19/1994	
2. Photo of Applicant (Required) 21		2a. Mailing Address 26		4. FE Number 65-0265360		Applied For Not Applicable	
22		27		5. Death rate of Status (Required) ☐		\$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Filing Contribution ☐		\$5.00 May Be Added to Fees	
24		29		8. Did corporation file liability for damages for under \$1,000.00 Filing Statement ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent COOK, DONALD F. 21110 NW 37TH AVENUE MIAMI FL 33055				10. Name and Address of New Registered Agent 81 Name 82 Street Address (City, State, Zip) (Not Applicable) 83 84 City FL 85 Zip Code			
11. I, the undersigned, declare that I am a resident of the State of Florida. I am a change was authorized by the corporation's board of directors. I hereby certify that the person named as registered agent of the corporation is a resident of the State of Florida. I am a change was authorized by the corporation's board of directors. I hereby certify that the person named as registered agent of the corporation is a resident of the State of Florida.							
12. OFFICERS AND DIRECTORS PD COOK, DONALD F. 21110 NW 37TH AVENUE MIAMI FL							
13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS 14. I hereby certify that the information supplied with this filing is voluntarily furnished and that, to the best of my knowledge, it is true and correct. I am a change was authorized by the corporation's board of directors. I hereby certify that the person named as registered agent of the corporation is a resident of the State of Florida.							

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-1-95 (205) 628-2655

