## **FILED** 2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # V14049** 1. Entity Name ELECTROMATIC, INC. Mailing Address Principal Place of Business 4311 DIAMOND TERRACE 4311 DIAMOND TERRACE WESTON FL 33331 WESTON FL 33331-3157 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc City & State 4. FEI Number City & State 65-0312510 Zip Country Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FUMBERG. EDUARDO Street Address (P.O. Box Number is Not Acceptable) **4311 DIAMOND TERR** WESTON FL 33331 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed hame of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax fiting requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. 11. TITLE . □ Delete TITLE FUMBERG, EDUARDO NAME **4311 DIAMOND TERR** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33331 ☐ Delete TITLE TITLE BERCOVICH, LAURA S NAME NAME STREET ADDRESS **4311 DIAMOND TERR** STREET ADDRESS CITY-ST-ZIP WESTON FL 33331

TITLE NAME

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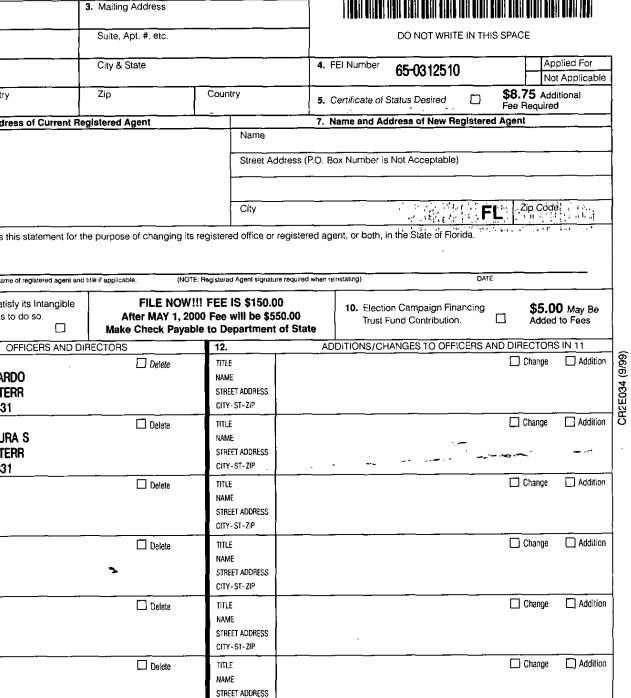
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## May 11, 2000 8:00 am Secretary of State

05-11-2000 90293 009 \*\*\*150.00



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13. Thereby 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