

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # V44772**1. Entity Name
TEMPXEC USA, INC.**FILED**
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90285 001 ***300.00

0311730

Principal Place of Business
**1701 WEST HILLSBORO BLVD.
SUITE 102
DEERFIELD BEACH FL 33442
US**Mailing Address
**1701 WEST HILLSBORO BLVD.
SUITE 102
DEERFIELD BEACH FL 33442
US****26107**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0364887		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent**MYERS, RICHARD L.
1701 W HILLSBORO BLVD., 102
DEERFIELD BEACH FL 33442****7. Name and Address of New Registered Agent**Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees****11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P TD	MYERS, RICHARD L.	1701 W. HILLSBORO BLVD., 102	DEERFIELD BEACH FL 33442	<input type="checkbox"/>
V SD	MYERS, MARGARET A.	1701 W HILLSBORO BLVD., 102	DEERFIELD BEACH FL 33442	<input type="checkbox"/>
D	MYERS, RICAHRD L II	613 N. 5TH ST.	LANTANA FL 33462	<input type="checkbox"/>
V	GREENLAND, GREGORY L	3220 NW 107 AVE	CORAL SPRINGS FL	<input type="checkbox"/>
VP	LIHAN, DANA	2808 NE 24TH CT	FT LAUDERDALE FL	<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)