

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

PROF.  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # V69910**

1. Corporation Name

U. S. TECHNOLOGIES, INC.

Principal Place of Business

8160 WOODLAND  
CIRCLE BLVD.  
TAMPA, FL 33624

Mailing Address

SAME

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip 29 Country 30 Country

3. Date Incorporated or Qualified  
October 5, 1992

3a. Date of Last Report

1995

4. FEI Number

59-3147461

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032.  
Florida Statutes ☐ Yes ☒ No

## 9. Name and Address of Current Registered Agent

PETER S. STEELE  
3911 NORTHAMPTON WAY  
TAMPA, FL 33624

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

## 10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when resigning)

DATE

## 12. OFFICERS AND DIRECTORS

TITLE P/VP/S/T ☐ DELETE  
NAME PETER S. STEELE  
STREET ADDRESS 3911 NORTHAMPTON WAY  
CITY-ST-ZIP TAMPA, FL 33624  
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

## 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/VP/S/T/CEO/Director ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS PETER S. STEELE  
1.4 CITY-ST-ZIP 3911 NORTHAMPTON WAY  
TAMPA, FL 33624  
2.1 TITLE DIRECTOR ☐ Change ☒ Addition  
2.2 NAME  
2.3 STREET ADDRESS SHERRY S. STEELE  
2.4 CITY-ST-ZIP 3911 NORTHAMPTON WAY  
TAMPA, FL 33624  
3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X

PETER S. STEELE

7/11/96

(813) 881-1901

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (12/95)