2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P00000080535 **DOCUMENT #**

S2TECHNICAL SALES, INC.



Mar 13, 2003 8:00 am § Secretary of State 03-13-2003 90080 034 ***150.00

FILED

1. Entity Name

Principal Place of Business

Mailing Address

4450 NORTHEAST 30TH AVENUE

4450 NORTHEAST 30TH AVENUE

	POINT FL 33064	LIGHTHOUSE POINT FL 3300	64		
	2 Ping Grove Run	3. Mailing Address	GroveR	- -	1 HERVIORY HIS BOOKS REINI BOOKS BOOKS BOOKS BOUND SOUND REINI BOKEN BYSAA SICKEL BESS IREES
Suite, Apt.		Suite, Apt. #, etc.	<u>Ch ov C</u>	<u> </u>	CHECK HERE IF MAKING CHANGES
City & Stat		Oviedo A	<u></u>	1	4. FEI Numbeer 65-1084777 7-/034777 Applied For Not Applicable
32 7	GT Country U.S.A.	-3276C-	Country	- ·	5. Certificate of Status Desired \$8.75 - Additional Fee Required
	6. Name and Address of Current	Registered Agent	Name		7. Name and Address of New Registered Agent
COLECE	& UTBERA, P.A.		Name	HERK	eu nHARA
	RIA AVENUE		Street Ac	ddress (P.	Shox Number is Not Acceptable)
_	ABLES FL 33134		28_1		7/02 0/1010 1-4/0
ZOINE G	ABLES FL 33134				— 1.75 O. 4
		4	City	1-00	FL 3996
	e named entity solomits this statement of tions of registered agent.	the purpose of changing its re	gistered office or	registered	d agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Manual Nyped or printed hayle of registered agent	and title if applicable. (NOTE: F	Registered Agent signatu	ire required w	when reinstating) DATE
F	FILE NOW!!! FEE IS \$150.00				
~ Afte	r May 1, 2003 Fee will be \$550.00				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
B4-1 A61	k Davabla ta Elazida Danartmant ai	F Ctata			
Make Checi	k Payable to Florida Department o	Jace			, , , , , , , , , , , , , , , , , , , ,
10.	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
10.	OFFICERS AND		TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
10. TITLE NAME	PTD PEGEL, SANDEE	DIRECTORS . Delete	TITLE NAME		
10.	PTD PEGEL, SANDEE 4450 NORTHEAST 30TH AVENUE	DIRECTORS . Delete	TITLE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND PTD PEGEL, SANDEE 4450 NORTHEAST 30TH AVENUE LIGHTHOUSE POINT FL 33064	DIRECTORS . Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	do vs	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	PTD PEGEL, SANDEE 4450 NORTHEAST 30TH AVENUE LIGHTHOUSE POINT FL 33064 SVD	DIRECTORS . Delete	TITLE NAME STREET ADDRESS	\$D VS	Change Addition
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12. 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 supplied in the corporation of the corporation or the receive of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all when the empowered.

SIGNATURE: 9