2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

Mailing Address

P02000089098 DOCUMENT

1. Entity Name

Principal Place of Business

MEGARON DEVELOPMENT, INC.



FILED Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90223 001 ***150.00

ARK. SUITE SE E 77+1	St. #B	
Hon, Fi	33/32	

-1499 W PALMETTO PARK, SUITE 224 1499-W. PALMETTO P - BOCA RATON FL 39486 BOCA RATON FL 3340 33 SE 7th Street #B 5 Buca_RAtion, Fi 33432 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For <u>02-0638</u>012 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR **MIAMI FL 33145** City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Make Check Payable to Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITI F ☐ Delete TITLE PD Change ☐ Addition BENAVENTE, ELMAR R NAME NAME benayente , elmar r 1499 W. PALMETTO PARK, SUITE 224 STREET ADDRESS STREET ADDRESS 33 S.E. 7th Street, Suite B CITY-ST-7IP **BOCA RATON FL 33486** CITY-ST-ZIP toca RATOH, FL 33432 TITLE ☐ Delete TITLE VD/SD Change ☐ Addition YURDAKUL, BERIL NAME NAME YURDAK-UL, BERIL 1499 W. PALMETTO PARK, SUITE 224 STREET ADDRESS STREET ADDRESS 33 S.E. 7th STREET, SUITE B BOCA RATION, \$1, 33432 CITY-ST-ZIP **BOCA RATON FL 33486** CITY-ST-ZIP Delete TITLE **K** Change ☐ Addition NAME YEMEHICIER, ALI H 33 S.E. 7th STREET, SUITEB NAME 1489 W. PALMETTO PARK BOCA, RATON FL 33486 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOLA RATION, FL 33432 TITLE TD ☐ Delete TITLE ☐ Change ☐ Addition NAME YEMENICILER, ALI N NAME STREET ADDRESS 1499 W. PALMETTO PARK, SUITE 224 STREET ADDRESS CITY-ST-ZIP BOCA RATON FL 33486 CITY-ST-ZIP TIT) E ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: