

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2001 8:00 am
Secretary of State
05-01-2001 90021 013 ***150.00

0600784

DOCUMENT # P27290

1. Entity Name

MISSOURI MITEK INDUSTRIES, INC.

Principal Place of Business

14515 N. OUTER FORTY ROAD, STE 300
P O BOX 7359
CHESTERFIELD MO 63017

Mailing Address

14515 N. OUTER FORTY ROAD, STE 300
P O BOX 7359
CHESTERFIELD MO 63017

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 **43-1531931**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **TOOMBS, EUGENE M.**
STREET ADDRESS **1116 TEMPLETON PLACE**
CITY-ST-ZIP **TOWN & COUNTRY MO**

TITLE **V** ☐ Delete
NAME **MANENTI, THOMAS J.**
STREET ADDRESS **2536 PEPPERMILL RIDGE DR**
CITY-ST-ZIP **CHESTERFIELD MO**

TITLE **V** ☐ Delete
NAME **CABLER, STEPHEN W.**
STREET ADDRESS **1164 CHAVANAC DRIVE**
CITY-ST-ZIP **MANCHESTER MO**

TITLE **EVP** ☒ Delete
NAME **SORDO, ARTURO P.**
STREET ADDRESS **14515 N. OUTER FORTY RD., SUITE 300**
CITY-ST-ZIP **CHESTERFIELD MO**

TITLE **VSGC** ☐ Delete
NAME **CARR, JOSEPH C JR.**
STREET ADDRESS **14515 N. OUTER FORTY ROAD STE. 300**
CITY-ST-ZIP **CHESTERFIELD MO 63017**

TITLE **VP** ☐ Delete
NAME **BURKHARDT, RONALD S**
STREET ADDRESS **14515 NORTH OUTER FORTY RD, STE #300**
CITY-ST-ZIP **CHESTERFIELD MO 63017**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☐ Change ☒ Addition
NAME **Arturo P. Sordo**
STREET ADDRESS **14515 N. Outer forty Road**
CITY-ST-ZIP **Chesterfield, MO 63017**

TITLE **Chairman & Chief Executive Officer** ☐ Change ☒ Addition
NAME **Eugene M. Toombs**
STREET ADDRESS **14515 N. Outer Forty Road**
CITY-ST-ZIP **Chesterfield, MO 63017**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

Joseph C. Carr, Jr.

4/20/01 (314) 8517479

Date

Daytime Phone #

CR2E034 (10/00)