

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 462760

1. Entity Name

LEXON, INC.

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90125 025 ***150.00

Principal Place of Business

Mailing Address

6211 N ANDERSON ROAD
TAMPA FLORIDA 33634

6211 N ANDERSON ROAD
TAMPA FLORIDA 33634-8007

2. Principal Place of Business

12850 Commodity Place

3. Mailing Address

12850 Commodity Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Tampa, FL 33626

City & State

Tampa, FL 33626

4. FEI Number

59-1633101

Applied For

Not Applicable

Zip

33626

Country

USA

Zip

33626

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CASTELLANO, VINCENT JR.
6211 N ANDERSON ROAD
TAMPA FLORIDA 33634

7. Name and Address of New Registered Agent

Name Castellano, Vincent Jr.

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

12850- Commodity Place

City Tampa

FL

Zip Code 33626

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

Castellano, Vincent Castellano, Jr.

1-17-00

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, 2000 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
NAME CASTELLANO JR, VINCENT
STREET ADDRESS 4103- SALTWATER BLVD
CITY-ST-ZIP TAMPA, FL 0 ☐ Delete

TITLE SD
NAME CASTELLANO, PATRICIA
STREET ADDRESS 4103- SALTWATER BLVD
CITY-ST-ZIP TAMPA, FL 0 ☐ Delete

TITLE VP
NAME CASTELLANO, BRIAN A
STREET ADDRESS 8614 TIMBLEBERRY LN
CITY-ST-ZIP TAMPA FL 33635 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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

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:

Castellano, Vincent Castellano, Jr.

1-17-00 (813) 925-0777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)