

2003 **163** FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

FILED

03 FEB 28 AM 9:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 581617

1. Entity Name

ELECTRIC BY SLATON, INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
8152 NW 67 ST

3. Mailing Address  
8540 MENTEITH TERR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
MIAMI FL

City & State  
MIAMI LAKES FL

4. FEI Number 59-1851614

Applied For  
Not Applicable

Zip  
33166

Country  
DADE

Zip  
33016

Country  
DADE

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name SLATON, WAYNE

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

8540 MENTEITH TERR

City MIAMI LAKES

FL

Zip Code  
33016

**DO NOT WRITE  
IN THIS SPACE**

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

*Wayne Slaton*

2-10-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SLATON, RALPH D 1271 MEADOWLARK AVE MIAMI SPRINGS, FL	DP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	800013694718 03/07/03--01062--002 **159.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SLATON, WAYNE 8540 MENTEITH TERR MIAMI LAKES, FL	DV	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Wayne Slaton*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-03

Date

305-796-6901

Daytime Phone #

CR2E034B (12/02)

2/3