

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90067 006 ***150.00

DOCUMENT # F00000001415

1. Entity Name
TRIMEX INTERNATIONAL, INC.



Principal Place of Business
513 N. MILLS AVENUE
ORLANDO FL 32803

Mailing Address
127 W. FAIRBANKS AVE., #457
WINTER PARK FL 32789

2. Principal Place of Business

251 DANA WAY

3. Mailing Address

Suite, Apt. #, etc.

City & State

WINTER PARK, FL

City & State

Zip

Country

32789

USA

Zip

Country

4. FEI Number 52-2091357

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

BOKAI-LUKINICH, GABOR
513 N MILLS AVE
ORLANDO FL 32803

7. Name and Address of New Registered Agent

Name

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

251

251 DANA WAY

City

WINTER PARK, FL

FL

Zip Code

32789

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

After May 1, 2003 Fee will be \$550.00

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 **P** ☐ Delete
NAME **SOLYMOSI, ZSUZSANNA**
STREET ADDRESS **513 N MILLS AVENUE**
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE **V** ☐ Delete
NAME **BOKAI-LUKINICH, GABOR**
STREET ADDRESS **513 N MILLS AVENUE**
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE **T** ☐ Delete
NAME **PETZ, OTTO**
STREET ADDRESS **513 N MILLS AVENUE**
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **251 DANA WAY**
STREET ADDRESS **WINTER PARK, FL 32789**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
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STREET ADDRESS **WINTER PARK, FL 32789**
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bokai-Lukinich, Gabor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-27-2003 407-7406263

Date

Daytime Phone #

CR2E034 (10/02)