

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2000 8:00 am
Secretary of State
 03-06-2000 90047 028 ***150.00

DOCUMENT # F95000006140

1. Entity Name

MAYPORT INCORPORATED N.V.

Principal Place of Business

% GRANT THORNTON LLP
 777 BRICKELL AVE. SUITE 1200
 MIAMI FL 33131

Mailing Address

DEE FROMM
 2500 HALLANDALE BEACH BLVD. STE 707 P
 HALLANDALE FL 33009-4840

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

98-0050695

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FROMM, DEE
 2500 E. HALLANDALE BEACH BLVD
 SUITE 707-P
 HALLANDALE FL 33009

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

T ☐ Delete
 NAME BOONSTRA, R.J.
 STREET ADDRESS DE RUYTERKADE 62
 CITY-ST-ZIP CURACAO, N.A.

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

P ☐ Delete
 NAME PIONKOWSKI, MARIA
 STREET ADDRESS QUINTA MARITZA, CALLE C-1, URB.LA LAGUNITA
 CITY-ST-ZIP CARACAS 1080, VENEZUELA

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

V ☐ Delete
 NAME DE CARLI, ANNA M
 STREET ADDRESS QUINTA CHUNEL, CALLE CHIVACOA
 CITY-ST-ZIP CARACAS 1061, VENEZUELA

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

S ☐ Delete
 NAME MELENIKIOTIS, SOTIRIOS
 STREET ADDRESS 139 CEDAR HILLS CENTER
 CITY-ST-ZIP CHAPEL HILL NC 27514

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

☐ Delete
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☐ Change ☐ Addition
 TITLE
 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

10 February 2000
 Date Daytime Phone #

CR2E034 (9/99)