

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

APPROVED
AND
FILED

02 MAY -3 PM 5:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Entity Name

MICA FLO II, INC.
F98000002646

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7450 East River Road

3. Mailing Address

7450 East River Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 3

Suite 3

City & State

City & State

Oakdale, CA

Oakdale, CA

Zip

Country

Zip

Country

95361

USA

95361

USA

DO NOT WRITE IN THIS SPACE

4. Fed Number

94-3323431

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

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

1201 Hays Street

City

Tallahassee

FL

Zip Code

32301-2525

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 P/CEO/D
NAME Goffman, Jeffrey
STREET ADDRESS 7450 East River Road, Suite 3
CITY-ST-ZIP Oakdale, CA 95361

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 800005452168--\$61

TITLE V/CEO/D
NAME Baker, Richard A.
STREET ADDRESS 7450 East River Road, Suite 3
CITY-ST-ZIP Oakdale, CA 95361

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard Baker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/1/02

Daytime Phone #

CR2E034B (12/8)



ACCOUNT NO. : 072100000032

REFERENCE : 559271 4302173

AUTHORIZATION :

Patricia Pizant

COST LIMIT : \$ 158.75

ORDER DATE : May 1, 2002

ORDER TIME : 3:27 PM

ORDER NO. : 559271-010

CUSTOMER NO: 4302173

CUSTOMER: Ms. Anne Stevenson
Swidler Berlin Shereff
The Chrysler Building, 11th Fl
405 Lexington Avenue
New York, NY 10174

~~800005452168-9~~

ANNUAL REPORT FILING

NAME: MICA FLO II, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder-EXT# 1118

EXAMINER'S INITIALS: _____

RECEIVED
02 MAY -3 PM 4:23
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA