

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000006447

1. Entity Name

MAIDSTONE DEVELOPMENT, INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90173 027 ***150.00

Principal Place of Business

Mailing Address

450 WAVERLY AVENUE, SUITE 8
PATCHOGUE NY 11772

450 WAVERLY AVENUE, SUITE 8
PATCHOGUE NY 11772-1555

642053



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 11-2527167

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Name

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

City

FL

Zip Code

MARTIRANO, JOSEPH C
5380 N. OCEAN AVENUE, UNIT 51
SINGER ISLAND FL 33404

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

TITLE NAME ☐ Delete
P
MARTIRANO, JOSEPH C
STREET ADDRESS 5380 N. OCEAN AVENUE, UNIT 51
CITY-ST-ZIP SINGER ISLAND FL 33404

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

TITLE NAME ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☒ Addition
V
MARTIRANO, CHRISTINE
STREET ADDRESS 949 OSTRANDER AVE.
CITY-ST-ZIP RIVERHEAD, NY 11901

TITLE NAME ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☒ Addition
V
MARTIRANO, JOHN
STREET ADDRESS 19 COMMODORE CIRCLE
CITY-ST-ZIP PORT JEFFERSON STATION, NY 11776

TITLE NAME ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
V
MARTIRANO, JR., JOSEPH C.
STREET ADDRESS 160 WEST NECK RD
CITY-ST-ZIP HUNTINGTON, NY 11743

TITLE NAME ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTINE MARTIRANO, VP

4/13/2000 (631) 654-5200

Date

Daytime Phone #

CR2E034 (9/99)