

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT

FILED
Jul 02, 2002 8:00 am
Secretary of State

07-02-2002 90816 044 ***550.00

DOCUMENT # F99000000615

1. Entity Name

MAPEI EAST CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1144 E. Newport Center Dr.

Suite, Apt. #, etc.

3. Mailing Address

1144 E. Newport Center Dr.

Suite, Apt. #, etc.

City & State

Deerfield Beach, FL

City & State

Deerfield Beach, FL

Zip **33442**

Country **USA**

Zip **33442**

Country **USA**

4. FEI Number

36-3658147

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name **Zimmerman, John R.**

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

1144 E. Newport Center Drive

City **Deerfield Beach**

FL

Zip Code **33442**

**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.

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
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust fund ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P NAME STREET ADDRESS CITY-ST-ZIP	Di Tempora, Nicholas 1144 E. Newport Center Drive Deerfield Beach, FL 33442	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE S NAME STREET ADDRESS CITY-ST-ZIP	Zimmerman, John R. 1144 E. Newport Center Drive Deerfield Beach, FL 33442	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

Nicholas Di Tempora, President

June 27, 2002

954-246-8600

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #