

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

FILED
Jun 16, 2002 8:00 am
Secretary of State

05-08-2002 90007 035 ***150.00

DOCUMENT # G-53977

1. Entity Name

Duo Products Corp.

35556

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7535 Enterprise Dr. Box 65

3. Mailing Address

10088 Daisy Av

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Riviera Beach, FL

City & State

Palm Beach Gardens FL

4. FFI Number

59-2318448

Applied For

Not Applicable

Zip

33404

Country

USA

Zip

33410

Country

USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Blaine Kloeckner

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

10088 Daisy Av.

City

Palm Beach Gardens

FL

Zip Code

33410

**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) ☐

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	President
NAME	Blaine Kloeckner
STREET ADDRESS	10088 Daisy Av
CITY-ST-ZIP	Palm Beach Gardens, FL 33410
TITLE	Vice President
NAME	Blaine Kloeckner
STREET ADDRESS	10088 Daisy Av
CITY-ST-ZIP	Palm Beach Gardens, FL 33410
TITLE	Treasurer
NAME	Blaine Kloeckner
STREET ADDRESS	10088 Daisy Av
CITY-ST-ZIP	Palm Beach Gardens, FL 33410
TITLE	Secretary
NAME	Joyce Kloeckner
STREET ADDRESS	10088 Daisy Av
CITY-ST-ZIP	Palm Beach Gardens, FL 33410
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: Blaine Kloeckner President 6/3/02 5616940511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)