## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # **H40555** Feb 04, 2000 8:00 am 1. Entity Name **Secretary of State** MAN-CON, INCORPORATED 02-04-2000 90063 043 \*\*\*150.00 Mailing Address Principal Place of Business 3460 S.W. 11TH STREET 3460 S.W. 11TH STREET DEERFIELD BEACH FL 33442-8137 DEERFIELD BEACH FL 33442 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2547432 Not Applicable Zip \_ Zip Country \$8.75 Additional \_Country\_ 5. Certificate of Status Desired $\Box$ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MANCINI, GUY A. Street Address (P.O. Box Number is Not Acceptable) 3460 S.W. 11TH STREET **DEERFIELD BEACH FL 33442** Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition Change ☐ Delete TITLE TITLE MANCINI, GUY A. NAME NAME **3460 S.W 11TH STREET** STREET ADDRESS STREET ADDRESS DEERFIELD BEACH FL CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ Delete TITLE TITLE MANCINI, JEFFREY J. NAME NAME 3460 S.W 11TH STREET STREET ADDRESS STREET ADDRESS DEERFIELD BEACH FL -CITY-ST-ZIP ---.CITY-ST-ZIP. ☐ Change ☐ Addition TITLE TITLE ☐ Delete MANCINI, ANTHONY J. NAME NAME 3460 S.W. 11TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DEERFIELD BEACH FL DAS ☐ Change Addition TITLE ☐ Delete TITLE MANCINI, MICHAEL G. NAME NAME 3460 S.W. 11TH STREET STREET ADDRESS STREET ADDRESS DEERFIELD BEACH FL CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITI F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CiTY-ST-ZIP

**SIGNATURE:** 

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/2000

(954) 427-0230

Daytime Phone #