

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H40555

1. Entity Name

MAN-CON, INCORPORATED

Principal Place of Business

3460 S.W. 11TH STREET
DEERFIELD BEACH FL 33442
US

Mailing Address

3460 S.W. 11TH STREET
DEERFIELD BEACH FL 33442
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

MANCINI, GUY A.
3460 S.W. 11TH STREET
DEERFIELD BEACH FL 33442

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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's 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, 2001 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

TITLE	DPT	☐ Delete
NAME	MANCINI, GUY A.	
STREET ADDRESS	3460 S.W. 11TH STREET	
CITY - ST - ZIP	DEERFIELD BEACH FL	
TITLE	DSV	☐ Delete
NAME	MANCINI, JEFFREY J.	
STREET ADDRESS	3460 S.W. 11TH STREET	
CITY - ST - ZIP	DEERFIELD BEACH FL	
TITLE	DV	☐ Delete
NAME	MANCINI, ANTHONY J.	
STREET ADDRESS	3460 S.W. 11TH STREET	
CITY - ST - ZIP	DEERFIELD BEACH FL	
TITLE	DAS	☐ Delete
NAME	MANCINI, MICHAEL G.	
STREET ADDRESS	3460 S.W. 11TH STREET	
CITY - ST - ZIP	DEERFIELD BEACH FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

Guy A. Mancini

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(954) 427-0230

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90132 013 ***150.00

A0056589



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2547432

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

CR2E034 (10/00)