

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 MAY 22 AM 8:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K65120

1. Entity Name
MINTUS, INC.



Principal Place of Business

11951 ROYAL PALM BLVD
SUITE 202 BUILDING 26
CORAL SPRINGS, FL 33065

Mailing Address

11951 ROYAL PALM BLVD
SUITE 202 BUILDING 26
CORAL SPRINGS, FL 33065

2. Principal Place of Business

11951 Royal Palm Blvd.

Suite, Apt. #, etc.

Suite 202, Bldg 26

City & State

Coral Springs, FL.

Zip

33065

Country

USA

3. Mailing Address

11951 Royal Palm Blvd.

Suite, Apt. #, etc.

Suite 202, Bldg 26

City & State

Coral Springs, FL.

Zip

33065

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

72-1184113

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MINTUS, CAROLYN A
11951 ROYAL PALM BLVD
SUITE 202 BLDG 26
CORAL SPRINGS, FL 33065

7. Name and Address of New Registered Agent

Name

Carolyn A. Mintus

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

Suite 202, Bldg 26

11951 Royal Palm Blvd.

City

Coral Springs, FL

FL

Zip Code

33065

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. I am familiar with, and accept the obligations of registered agent. CAROLYN A. MINTUS

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when appointing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$650.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PSTC ☐ Delete
NAME MINTUS, CAROLYN A
STREET ADDRESS 11951 ROYAL PALM BLVD BLDG 26 STE 202
CITY-ST-ZIP CORAL SPRINGS, FL 33065

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Honorary chairman ☐ Change ☐ Addition
NAME Yoshi Kuni, Ichiro
STREET ADDRESS 11951 Royal Palm Blvd.
CITY-ST-ZIP Bldg 26 Ste 202
CORAL SPRINGS, FL 33065

TITLE Vice President ☐ Change ☒ Addition
NAME Soblotno, Chris
STREET ADDRESS 11951 Royal Palm Blvd.
CITY-ST-ZIP Bldg 26 Ste 202
CORAL SPRINGS, FL 33065

TITLE Vice President ☐ Change ☒ Addition
NAME Soblotno, Adrienne
STREET ADDRESS 11951 Royal Palm Blvd.
CITY-ST-ZIP Bldg 26 Ste 202
CORAL SPRINGS, FL 33065

TITLE Vice President ☐ Change ☒ Addition
NAME Viana Marco Eduardo
STREET ADDRESS 11951 Royal Palm Blvd.
CITY-ST-ZIP Bldg 26 suite 202
CORAL SPRINGS, FL 33065

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

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

12. 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

21 5/29