

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

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91236 019 ***150.00

DOCUMENT # **L 85106**

1. Entity Name

METALOX, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2405 DIVISION AVE
Suite, Apt. #, etc.

3. Mailing Address

12667 72ND CT NORTH
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

WEST PALM BEACH FL

City & State

WEST PALM BEACH FL

4. FEI Number

65-0205161

Applied For

Not Applicable

Zip

33407

Country

PALESTINE

Zip

33412

Country

PALESTINE

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

GEORGE BENKLY

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

12667 72ND CT NORTH

City

WEST PALM BEACH

FL

Zip

33412

**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

GEORGE BENKLY

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 \$350.00

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	GEORGE BENKLY
STREET ADDRESS	12667 72ND CT NORTH
CITY-STATE-ZIP	WEST PALM BEACH FL 33412
TITLE	VICE PRESIDENT
NAME	CHRISTINE K BENKLY
STREET ADDRESS	12667 72ND CT NORTH
CITY-STATE-ZIP	WEST PALM BEACH FL 33412
TITLE	Treasurer
NAME	JOHN BENKLY
STREET ADDRESS	12667 72ND CT NORTH
CITY-STATE-ZIP	WEST PALM BEACH FL 33412
TITLE	Sec/Treas
NAME	ALEXIS BENKLY
STREET ADDRESS	12667 72ND CT NORTH
CITY-STATE-ZIP	WEST PALM BEACH FL 33412
TITLE	
NAME	
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CITY-STATE-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)(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 on an attachment with an address, with all other like empowered.

SIGNATURE:

GEORGE M BENKLY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/02

CR2E034B (12/01)