2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0100002038

1. Entity Name

MATAPALO FUTURES CORPORATION

indicated on this report or supple of the corporation or the receiver changed, or on an attachment with

SIGNATURE:



Mar 31, 2003 8:00 am Secretary of State 03-31-2003 90172 044 ****61.25

FILED

			A COUNT IN				
Principal Place of Business 1330 NORTHEAST JENSEN BEACH BOULEVARD JENSEN BEACH FL 34957		Mailing Address POST OFFICE BOX 2413 STUART FL 34995		1 1887/181 811 88181	H411 44111 44111 44111 44111 44111	12 011 4020 0 421	ài (811 188)
2. Principal F	Place of Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 65-	4. FEI Number 65-1085018 Applied For		
Zip Country		Zip Country			Not Applica		
	6. Name and Address of Curren	t Registered Agent			ss of New Registered Ac	ee Require	d
SDIEGEI	2 LITDEDA DA		Name				
SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES FL 33134			Street Address (P.O. Box Number is Not Acceptable)				
COUNT CYPIES I'E 33134		City			FL	Zip Code	9
the obligate	named entity submits this statement tions of registered agent. Signature, typed o printed name of registered age		registered office or reg		e State of Florida. I am fa	miliar with, i	and accept
10.	FILE NOW: FEE IS \$61.25	- Trust Fund C	npaign Financing contribution.	\$5.00 May Be Added to Fees	Make Check Florida Departr	ment of S	State
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD CHAMBERS, BRIAN S 1330 NORTHEAST JENSEN BEA JENSEN BEACH FL 34957	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONO/OFFINALE			☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPIER, PHILLIP JR 1330 NORTHEAST JENSEN BE/ JENSEN BEACH FL 34957_	Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAMBERS, KELSEY L 1330 NORTHEAST JENSEN BEA JENSEN BEACH FL 34957	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		1	Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		I	□ Change	☐ Addition
12. I hereby of indicated of the cor	Lectify that the information supplied will be continued by the continued of the continued o	th this filing does not qualify for is year and accurate and that m	the exemption stated by signature shall have as required by Chapte	in Section 119.07(3)(i), Florie the same legal effect as if n 7, Florida Statutes; and i	da Statutes. I further certif nade under oath; that I am that my name appears in I	y that the in an officer of Block 10 or	formation or director Block 11 if