

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

FILED
Jul 11, 2002 8:00 am
Secretary of State

07-11-2002 90245 023 ***150.00

DOCUMENT # P00000004138

1. Entity Name

M.A.E.S. CORP.

DO NOT WRITE IN THIS SPACE

00148828

2. Principal Place of Business
16375 NE 18th Ave.
Suite, Apt. #, etc.

3. Mailing Address
16375 NE 18th Ave.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

#201
City & State
North Miami BEach, FL

#201
City & State
North Miami Beach, FL

4. FEI Number
65-1094212

Applied For
Not Applicable

Zip Country
33162 USA

Zip Country
33162 USA

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name
Gary L. Brown, Esq.
Street Address (P.O. Box Number is Not Acceptable)
4000 Hollywood Blvd., # 265-S

City Zip Code
Hollywood FL 33021

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7/5/02

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 \$550.00
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
NAME
STREET ADDRESS
CITY - ST - ZIP
PSD
ENRIQUE SOLTANIK
16375 NE 18th Ave., #201
North Miami Beach, FL 33162

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/5/02

CR2E034B (12/01)

Attachment
B#00000004138

**M.A.E.S. CORP.
16375 NE 18th AVENUE
SUITE 201
NORTH MIAMI BEACH, FLORIDA 33162**

July 5, 2002

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399


Re: 2002 Uniform Business Report

Dear Sir or Madam:

Our corporation never received the 2002 Uniform Business Report. Therefore, enclosed is the 2002 Uniform Business Report along with our check in the amount of \$150.00 representing your filing fee.

Thank you.

Very truly yours,


Enrique Soltanik, President