

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 23, 2001 8:00 am
Secretary of State

04-30-2001 90405 027 ***150.00

DOCUMENT # P00000016609

1. Entity Name
ENTRYFORM, INC.

Principal Place of Business
1870 ALOMA AVENUE
SUITE 120 280
WINTER PARK FL 32789

Mailing Address
1870 ALOMA AVENUE
SUITE 120 280
WINTER PARK FL 32789



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3641740

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

CORPCO, INC.
2699 SOUTH BAYSHORE DRIVE 7TH FLOOR
MIAMI FL 33133

7. Name and Address of New Registered Agent

Name **Mark Dalton**

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

Scheiver International Plaza

7280 W. Palmetto Park Rd. Ste. 301-N

City **Boca Raton**

FL

Zip Code **33433**

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]

(NOTE: Registered Agent signature required when reinstating)

8/20/01

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP	CEO/President Mark Dalton 316 Briny Avenue Pompano Beach, FL 33060	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President/COO Aryksin Noble 4305 W. Atlantic Blvd. Coconut Creek, FL 33066	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Board Member Dr. Eng von Leitner Guenthe Str. 21 Hannover, Germany 30519	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/20/01

Date

Daytime Phone #

0010728 AV

CR2E034 (5/01)

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000016609

1. Entity Name

Entry Form, Inc.

Attachment D#
77931Principal Place of Business
1870 Aloma Avenue
Suite: 280
Winter Park, FL 32789
USAMailing Address
1870 Aloma Avenue
Suite: 280
Winter Park, FL 32784
USA

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3641740

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Corpeo, Inc.
2699 South Bayshore Drive 7th floor
Miami, Florida 33133

Name Mark Dalton

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

Scheer International Plaza
7280 W. Palmetto Park Rd. Ste. 301-N
City Boca Raton FL Zip Code 33433

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME Dalton, Mark, CEO/President
STREET ADDRESS 316 Briny Avenue
CITY-ST-ZIP Pompano Beach, FL 33060TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE NAME Noble, Aryksin, COO/Vice President
STREET ADDRESS 4305 W. Atlantic Blvd.
CITY-ST-ZIP Coconut Creek, FL 33066TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE NAME Dr. Fritz Eng von Leitner, Board Member
STREET ADDRESS Guenthe Str. 21
CITY-ST-ZIP Hannover, Germany 30519TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE NAME
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SIGNATURE:

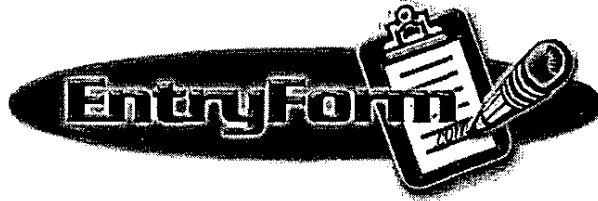
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

Attachment D# P00000016609-77931



August 20, 2001

Uniform Business Report
Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

This is our 3rd submission of this document. The first time we sent the UBR report with the \$150, we sent it certified mail. We later received a copy of the UBR back stating we needed to amend it and send it back. When I received the UBR report to be amended, I called the Division of Corporations and got the necessary directions to be able to complete the document correctly, did so, then proceeded to certify mail it back to the Division of Corporations again. Enclosed is a copy of the certified receipt.

Yesterday I received another copy of the UBR report. This report states that EntryForm, Inc. owes \$550 now and that we must submit it by September 30, 2001. I called and spoke with a representative and her suggestion was for me to complete the form again, with this letter requesting that the late fee of \$550 be waived since our check of \$150 has already been deposited by the Division of Corporations and the fact that we have the copy of the certified mail receipt.

Please call me regarding this latest development with the UBR report. I am anxiously waiting to get this resolved with great expediency. Thank you for your time and consideration in this matter.

Sincerely,

A handwritten signature in black ink, appearing to be "Angela Landsberg".

Angela Landsberg

Attachment D# P00000016609 - 77931

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>1. Article Addressed to:</p> <p>Division of Corporations P. O. BOX 1500 Tallahassee, FL 32302-1500</p>		<p>A. Received by (Please Print Clearly) Kendrick Bryant B. Date of Delivery 4/16/04</p> <p>C. Signature <i>[Signature]</i> D. Delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>2. Article Number (Copy from service label) 2 219-514-271</p>		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
PS Form 3811, July 1999		Domestic Return Receipt	
		102595-99-M-1789	



Attachment D#
P00000016609
7931

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

May 9, 2001

ENTRYFORM, INC.
1870 ALOMA AVENUE
SUITE 280
WINTER PARK, FL 32789

Subject: ENTRYFORM, INC.

Reference Number: P00000016609

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The new registered agent must sign accepting the designation.

Provide the title(s) of each officer/director listed on the report or on an attachment.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/TR
ANNUAL REPORTS SECTION

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314