

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000041031

1. Entity Name

ETON SERVICES INC.

FILED

Apr 05, 2001 8:00 am
Secretary of State

04-05-2001 90045 029 ***150.00

Principal Place of Business

EAST LOUGHLAN, JURBY EAST, JURBY
ISLE OF MAN IM7 3EZ

Mailing Address

EAST LOUGHLAN, JURBY EAST, JURBY
ISLE OF MAN IM7 3EZ

940122

2. Principal Place of Business

Suite, Apt. #, etc.

VICTORIA HOUSE, 26 VICTORIA ST

3. Mailing Address

Suite, Apt. #, etc.

VICTORIA HOUSE, 26 VICTORIA ST

City & State

DOUGLAS

City & State

DOUGLAS

4. FEI Number

98-0233684

Applied For

Not Applicable

Zip

IM1 2LE

Country

ISLE OF MAN

Zip

IM1 2LE

Country

ISLE OF MAN

5. Certificate of Status Desired ☐

\$8.75

Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

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

City

FL

Zip Code

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 ☐ Delete
NAME SD
STREET ADDRESS BREW, KAREN
CITY-ST-ZIP EAST LOUGHLAN, JURBY EAST, JURBY
ISLE OF MAN IM7 3EZ

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS BUTLER, MARION
CITY-ST-ZIP 9 VICTORIA PLACE, DOUGLAS
ISLE OF MAN IM2 4ET

TITLE ☒ Delete
NAME D
STREET ADDRESS BREW, ALAN
CITY-ST-ZIP EAST LOUGHLAN, JURBY EAST, JURBY
ISLE OF MAN IM7 3EZ

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

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:

Karen Brew - KAREN BREW

Date

Daytime Phone #

03/30/2001

CR2E034 (10/00)