

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90394 041 ***158.75

DOCUMENT # P00000064086

1. Entity Name

ALTRON GROUP OF COMPANIES, INC.

Principal Place of Business

Mailing Address

~~3820 S. LAKE TERR.~~
~~MIRAMAR FL 33023~~

~~3820 S. LAKE TERR.~~
~~MIRAMAR FL 33023~~

044110



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8362 Pines Blvd

3. Mailing Address

8362 Pines Blvd

Suite, Apt. #, etc.

342

Suite, Apt. #, etc.

Suite 342

City & State

Pembroke Pines FL

City & State

Pembroke Pines

4. FEI Number

651052580

Applied For

Not Applicable

Zip

Country

33024

Broward

Zip

33024

Country

Broward

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

BARNES, DONALD
3820 S. LAKE TERR.
MIRAMAR FL 33023

Name **SANDY Forbes**

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

8362 Pines Blvd. Suite 342

City

Pembroke Pines

FL

Zip Code

33024

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

Sandy Forbes

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 **D** ☒ Delete
NAME **BARNES, DONALD**
STREET ADDRESS **3820 S. LAKE TERR.**
CITY-ST-ZIP **MIRAMAR FL 33023**

TITLE **SANDY Forbes** ☒ Change ☐ Addition
NAME **8362 Pines Blvd Suite 342**
STREET ADDRESS **Pembroke Pines FL 33024**
CITY-ST-ZIP **President**

TITLE **D** ☒ Delete
NAME **FORBES, SANDY**
STREET ADDRESS **3820 S. LAKE TERR.**
CITY-ST-ZIP **MIRAMAR FL 33023**

TITLE **VICE President** ☐ Change ☒ Addition
NAME **Leonard T. WRIGHT**
STREET ADDRESS **8362 Pines Blvd Suite 342**
CITY-ST-ZIP **Pembroke Pines FL 33024**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Erminude Mercy**
STREET ADDRESS **8362 Pines Blvd Suite 342**
CITY-ST-ZIP **Pembroke Pines FL 33023**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **JASON MERCY-Treasurer** ☐ Change ☒ Addition
NAME **8362 Pines Blvd Suite 342**
STREET ADDRESS **Pembroke Pines FL 33024**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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:

Sandy Forbes

4/25/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)