

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000064619

1. Entity Name

WILTON HOLDINGS, INC.

Principal Place of Business

6450 SW 88TH ST.  
MIAMI FL 33156

Mailing Address

6450 SW 88TH ST.  
MIAMI FL 33156

2. Principal Place of Business

7700 N. Kendall Dr.

3. Mailing Address

7700 N. Kendall Dr.

Suite, Apt. #, etc.

503

Suite, Apt. #, etc.

503

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33156

Country

Zip

33156

Country

4. FEI Number

applied for.

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BURNS, NOEL  
6450 SW 88TH ST.  
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name  
BURNS, NOEL  
Street Address (P.O. Box Number is Not Acceptable)  
7700 N. Kendall Dr.  
suite # 503  
City  
Miami FL Zip Code  
33156

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

NOEL BURNS

(NOTE: Registered Agent signature required when reinstating)

4/5/01

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 \$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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BURNS, NOEL  
6450 SW 88TH ST.  
MIAMI FL 33156 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P/D  
BURNS, NOEL  
7700 N. Kendall Dr. Suite 503  
MIAMI, FL 33156 ☒ Change ☐ Addition

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

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

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NOEL BURNS

4/5/01

Date

(305) 274-0333

Daytime Phone #



DO NOT WRITE IN THIS SPACE

0194696

CR2E034 (10/00)