

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90242 033 ***158.75

DOCUMENT # P01000013231

1. Entity Name
MATTINE SOFTWARE INC.

Principal Place of Business

**9700 68TH ST. N.
 PINELLAS PARK FL 33782**

Mailing Address

**9700 68TH ST. N.
 PINELLAS PARK FL 33782**

2. Principal Place of Business

2209 RIVERSIDE DR SO.

3. Mailing Address

2209 RIVERSIDE DR SO

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CLEARWATER, FLORIDA

City & State

CLEARWATER FLORIDA

4. FEIN Number

59-3696750

Applied For

Not Applicable

Zip

33764

Country

US

Zip

33764

Country

USA

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BROCKAS, PAUL M

**9700 68TH ST. N. 2209 RIVERSIDE DR. SOUTH
 PINELLAS PARK FL 33782 CLEARWATER, FL 33764**

7. Name and Address of New Registered Agent

Name

Street Address

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, 2002 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	D	☐ Delete
NAME	BROCKUS, PAUL M	
STREET ADDRESS	9700 68TH ST. N.	
CITY-ST-ZIP	PINELLAS PARK FL 33782	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☐ Change ☒ Addition
NAME	AGNES BROCKUS	
STREET ADDRESS	2209 RIVERSIDE DRIVE SOUTH	
CITY-ST-ZIP	CLEARWATER, FL 33764	
TITLE	D	☐ Change ☐ Addition
NAME	PAUL BROCKUS	
STREET ADDRESS	2209 Riverside Dr South	
CITY-ST-ZIP	CLEARWATER, FL 33764	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-02 727-536-6681

Date

Daytime Phone #

CR2E034 (9/01)