

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 26, 2002 8:00 am
Secretary of State

09-09-2002 90022 046 ***150.00

DOCUMENT # *P01000039007*

1. Entity Name

Maus Enterprises, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

780 Oakland Hills Circle

Suite, Apt. #, etc.

Suite #202

City & State

Lake Mary, FL

Zip

32746

Country

3. Mailing Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3712953

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Chris Maus

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

780 Oakland Hills Circle

City

Lake Mary

FL

Zip Code

32746

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

Chris Maus

Signature, typed or printed name of registered agent, and date if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

7/29/02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

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	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
<i>President</i>	<i>Chris Maus</i>	<i>780 Oakland Hills Circle</i>	<i>Suite 202 Lake Mary FL 32746</i>				

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Chris Maus

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/02

Date

407-302-6469

Daytime Phone #

CR2E0348 (12/01)

Attachment

43066 [REDACTED]
P01 000039007

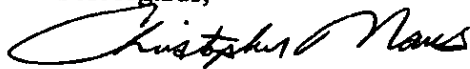
Uniform Business Report
Division of Corporations
PO BOX 1500
Tallahassee, FL 32302-1500

July 29, 2002

Dear Sirs,

I am sending a letter of application for \$150.00. My company Maus Enterprises, Inc. never received this application. This application was never sent to the right address. Thank you in advance for your time.

Best regards,



Christopher Maus
President - Maus Enterprises, Inc.