

FILED
Jun 18, 2002 8:00 am
Secretary of State

05-24-2002 91328 035 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **PO1000046812** ✓

1. Entity Name

MAKIN HOLDINGS, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1900 GLADES RD

3. Mailing Address

Suite, Apt. #, etc.

450

Suite, Apt. #, etc.

City & State

BOCA RATON FL

City & State

Zip

33431

Country

US

Zip

Country

4. FEI Number

65-1123278

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name **SCITARETH - STEVEN**

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

2300 GLADES RD

302E

City

BOCA RATON

FL

Zip Code

33431

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]

(NOTE: Registered Agent signature required when relocating)

DATE

6/11/02

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
D KENNY HOLMES
2416 45TH ST
VERO BCH, FL 32967

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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 officers empowered.

SIGNATURE:

[Signature]

KENNY HOLMES

5/11/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Printed

CR2E034B (12/01)