

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90214 006 ***150.00

DOCUMENT # P02000081362

1. Entity Name
MIDA 200 CORP.



Principal Place of Business
**777 E. ATLANTIC AVE.
APT. #248
DELRAY BEACH FL 33483**

Mailing Address
**777 E. ATLANTIC AVE.
APT. #248
DELRAY BEACH FL 33483**

2. Principal Place of Business
14545 J MILITARY TRAIL

3. Mailing Address
14545 J MILITARY TRAIL

Suite, Apt. #, etc.
149

Suite, Apt. #, etc.
149

City & State
DELRAY BEACH, FL

City & State
DELRAY BEACH, FL

Zip
33484

Country

Zip
33484

Country

4. FEI Number
134205257

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**HAVRILA, MIROSLAV
777 E. ATLANTIC AVE.
APT. #248
DELRAY BEACH FL 33483**

7. Name and Address of New Registered Agent

Name **Dariusz Bether**
Street Address (P.O. Box Number is Not Acceptable) **14545 J MILITARY TRAIL # 149**
City **DELRAY BEACH** **FL** Zip Code **33484**

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. I am familiar with, and accept the obligations of registered agent.

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

**REGISTERED AGENT
DARIUSZ BETHER**

04-29-03
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **HAVRILA, MIROSLAV**
STREET ADDRESS **777 E. ATLANTIC AVE., APT. #248**
CITY-ST-ZIP **DELRAY BEACH FL 33483**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **DARIUSZ BETHER**
STREET ADDRESS **14545 J MILITARY TRAIL # 149**
CITY-ST-ZIP **DELRAY BEACH, FL, 33484**

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: PRESIDENT DARIUSZ BETHER 04-29-03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/02)