

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91058 002 ***150.00

DOCUMENT # P02000084452

1. Entity Name
MITRA ENTERPRISES, INC.



Principal Place of Business
**6529 CENTRAL AVE
ST PETERSBURG FL 33710**

Mailing Address
**6529 CENTRAL AVE
ST PETERSBURG FL 33710**



2. Principal Place of Business

5918 BAHAMA SHORES Dr. So.
Suite, Apt. #, etc.

3. Mailing Address

5918 BAHAMA SHORES Dr. So.
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
St. Petersburg, Florida

Zip
33705

Country
USA

City & State
St. Petersburg, Florida

Zip
33705

Country
USA

4. FEI Number
134206718

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**SNYDER, D. JAY
6529 CENTRAL AVE
ST PETERSBURG FL 33710**

7. Name and Address of New Registered Agent

Name **P.J. Benton**
Street Address (P.O. Box Number is Not Acceptable)

5918 BAHAMA SHORES Dr. So.
City **St. Petersburg** **FL** Zip Code **33705**

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 **P.J. Benton**
(NOTE: Registered Agent signature required when reinstating)

4/19/03
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 **President** ☐ Delete
NAME **Debra M. Benton**
STREET ADDRESS **1101 Firethorne Club Drive**
CITY-ST-ZIP **Marvin - NC - 28173**

TITLE **Secretary** ☐ Delete
NAME **P.J. Benton**
STREET ADDRESS **5918 BAHAMA SHORES Dr. So.**
CITY-ST-ZIP **St. Pete - FL - 33705**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
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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: **Debra M. Benton** **4/19/03** **704-359-9819**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)