

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

FILED
Apr 15, 2005 8:00 am
Secretary of State

04-15-2005 90100 031 ***150.00

DOCUMENT # PO4000159699

1. Entity Name

MADEN INTERNATIONAL CORP

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

100 Kings Point Dr
Suite, Apt. #, etc.
1706

3. Mailing Address

100 Kings Point Dr
Suite, Apt. #, etc.
1706

DO NOT WRITE IN THIS SPACE

City & State

Sunny Isles Beach, Fl.

City & State

Sunny Isles Beach, Fl.

4. FEI Number

34-2028298

Applied For

Not Applicable

Zip

33160

Country

Miami-Dade

Zip

33160

Country

Miami-Dade

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Enrique Madia

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

100 Point Dr Apt 1706

City

Sunny Isle Beach

FL

Zip Code

33160

**DO NOT WRITE
IN THIS SPACE**

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) ☐

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 PS
NAME Enrique Madia
STREET ADDRESS 100 Kings Point #1706
CITY - ST - ZIP Sunny Isle Beach Fl. 33160

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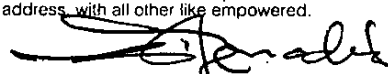
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**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:



Enrique Madia-President

4/8/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CD252348 (12/01)