

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Apr 18, 2001 8:00 am**  
**Secretary of State**

04-18-2001 90055 044 \*\*\*150.00

**DOCUMENT # P92000009024**

1. Entity Name  
**EXPON, INC.**

Principal Place of Business <b>1440 CORAL RIDGE DR. 290 CORAL SPRINGS FL 33071</b>	Mailing Address <b>1440 CORAL RIDGE DRIVE 290 CORAL SPRINGS FL 33071</b>
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2. Principal Place of Business <b>2545 E. Sunrise Blvd.</b>	3. Mailing Address <b>2545 E. Sunrise Blvd.</b>
Suite, Apt. #, etc. <b># 192</b>	Suite, Apt. #, etc. <b># 192</b>
City & State <b>Ft. Lauderdale, FL</b>	City & State <b>Ft. Lauderdale, FL</b>

Zip <b>33304</b>	Country <b>Broward</b>	Zip <b>33304</b>	Country <b>Broward</b>
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4. FEI Number **65-0374784**

Applied For ☐ Not Applicable ☐

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

6. Name and Address of Current Registered Agent

**ONDI, GEORGE G  
1440 CORAL RIDGE DR  
290  
CORAL SPRINGS FL 33071**

7. Name and Address of New Registered Agent

Name  
**ONODI, GEORG G**

Street Address (P.O. Box Number is Not Acceptable)  
**2545 E. SUNRISE BLVD.**

# **192**

City  
**FT. LAUDERDALE**

FL Zip Code  
**33304**

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 *Georg G Onodi* (NOTE: Registered Agent signature required when reinstating)

DATE 4/10/01

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

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ONODI, GEORG G DR</b> <b>1440 CORAL RIDGE DR, 290</b> <b>CORAL SPRINGS FL 33071</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ONODI, GEORG G DR</b> <b>2545 E. SUNRISE BLVD., # 192</b> <b>FT. LAUDERDALE, FL 33304</b>
	<input type="checkbox"/> Delete		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

SIGNATURE: *Georg G. Onodi* **April 10, 2001** **(954) 575-1146**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)