FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Mar 06, 2001 8:00 am DOCUMENT # P92000012084 Secretary of State MAYTON INC. OF FLORIDA 03-06-2001 90295 031 \*\*\*150.00 Principal Place of Business Mailing Address 404 E. ATLANTIC BLVD. 404 E. ATLANTIC BLVD. SUITE 101 SUITE 101 PONPANO BEACH FL 33060 PONPANO BEACH FL 33060 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0402810 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROSENTHAL, STUART S ESQ Street Address (P.O. Box Number is Not Acceptable) 404 E. ATLANTIC BLVD. SUITE 101 PONPANO BEACH FL 33060 City Zip Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE Delete TITLE Change BRETON, ERIC GUY NAME NAME STREET ADDRESS 1500 \$ OCEAN BLVD #507 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33062 TITLE ☐ Delete TITLE Change Addition **BRETON, NICHOLAS** NAME NAME STREET ADDRESS STREET ADDRESS 1500 S OCEAN BLVD #507 CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33062 TITLE ☐ Delete TITLE ☐ Addition NAME BRETON, CLAUDINE NAME STREET ADDRESS 1500 S OCEAN BLVD #507 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33062 ☐ Change ☐ Addition TITLE ☐ Delete TITLE BRETON, JEAN FRANCOIS NAME NAME STREET ADDRESS 1500 S OCEAN BLVD #507 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP POMPANO BEACH FL 33062 ☐ Change Addition TITLE ☐ Delete TITLE BRETON, CLAUDE DR NAME NAME STREET ADDRESS STREET ADDRESS 1500 S OCEAN BLVD #507 CITY-ST-ZIP J CITY-ST-ZIP POMPANO BEACH FL 33062 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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:

ALD

Nicolas wraton

S FB13UHY2401 450534178

Daytime Phone