

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000012084

Entity Name: MAYTON INC. OF FLORIDA

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

404 E. ATLANTIC BLVD.
SUITE 101
POMPANO BEACH, FL 33060 US

Current Mailing Address:

404 E. ATLANTIC BLVD.
SUITE 101
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

2600 N.E. 14TH STREET CAUSEWAY
POMPANO BEACH, FL 33062 US

New Mailing Address:

2600 N.E. 14TH STREET CAUSEWAY
POMPANO BEACH, FL 33062 US

FEI Number: 65-0402810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSENTHAL, STUART S ESQ
404 E. ATLANTIC BLVD.
SUITE 101
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

ROSENTHAL, STUART S ESQ
2600 N.E. 14TH STREET CAUSEWAY
POMPANO BEACH, FL 33062 US

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:

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BRETON, ERIC GUY
Address: 26 BOUL. BROMONT
City-St-Zip: BROMONT, QU J2L 2K3 CA

Title: DST () Delete
Name: BRETON, NICHOLAS
Address: 26 BOUL. BROMONT
City-St-Zip: BROMONT, QU J2L 2K3 CA

Title: DVP () Delete
Name: BRETON, CLAUDINE
Address: 26 BOUL. BROMONT
City-St-Zip: BROMONT, QU J2L 2K3 CA

Title: DVP () Delete
Name: BRETON, JEAN FRANCOIS
Address: 26 BOUL. BROMONT
City-St-Zip: BROMONT, QU J2L 2K3 CA

Title: D () Delete
Name: BRETON, CLAUDE DR
Address: 26 BOUL. BROMONT
City-St-Zip: BROMONT, QU J2L 2K3 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DST (X) Change () Addition
Name: BRETON, NICOLAS
Address: 26 BOUL. BROMONT
City-St-Zip: BROMONT, QU J2L 2K3 CA

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NICOLAS BRETON

S/D

04/15/2009

Electronic Signature of Signing Officer or Director

Date