

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

FILED
Jun 18, 2002 8:00 am
Secretary of State

06-11-2002 90390 038 ***158.75

DOCUMENT # **P93000005573**
1. Entity Name **MAPPY'S SUPPLIES INC.**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
740 OCEAN DRIVE
Suite, Apt. #, etc.
SUITE - 2
City & State
MIAMI BEACH FLORIDA
Zip
33139 Country
DADE

3. Mailing Address
10201 EAST BROADVIEW DRIVE
Suite, Apt. #, etc.
BAYHAR BOR ISLAND
City & State
FLORIDA 33154
Zip
DADE

DO NOT WRITE IN THIS SPACE

4. FEI Number
8502456059

Applied For
Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **NICOLE BASABE**

Street Address (P.O. Box Number is Not Acceptable)
740 OCEAN DRIVE
MIAMI BEACH FLORIDA

City **FL** Zip Code **33139**

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 **XNB. Nicole Basabe** DATE **6/3/2002**

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 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 ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

11. **Pres - Sect. Officers**
NICOLE BASABE
740 OCEAN DRIVE
MIAMI BEACH FLORIDA 33139

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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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.

CR2E034B (12/01)