

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2003 8:00 am
Secretary of State

05-20-2003 90067 023 ***158.75

DOCUMENT # P93000028928

1. Entity Name
~~ANTON, INC.~~
AKA S.H. MARIA INCORPORATED

Principal Place of Business
12505 BOYETTE RD
RIVERVIEW FL 33569

Mailing Address
12505 BOYETTE RD
RIVERVIEW FL 33569

2. Principal Place of Business
12505 Boyette RD.

3. Mailing Address
P.O. Box 2060

Suite, Apt. #, etc.

City & State
Riverview, Florida

City & State
Riverview, Florida

Zip
33569

Country
Hillsborough

Zip
33568

Country
Hillsborough

6. Name and Address of Current Registered Agent
PHAM, ANTON V. ~~ANTHONY V.~~
12505 BOYETTE RD
RIVERVIEW FL 33569

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PHAM, DR. HIEP 2009 ECHO FOREST DRIVE, #103 CHARLOTTE NC 28270 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PHAM, HIEP 68 Yorkshire Court Roanoke, VA 24019 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS PHAM, ANTHONY V. 12505 BOYETTE ROAD RIVERVIEW FL 33569 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PHAM, DOAN VAN 12505 BOYETTE ROAD RIVERVIEW FL 33569 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Hiep Pham **4/25/2003** (540)591-5815

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2034 (10/02)

ANCON INC / SH MARIN INC
 PHUNG PHI HUYNH
 HIEP THANH PHAM
 P.O. 220, PH. 540-591-5815
 CLOVERDALE, VA 24077

66-85/531
 0240579672

DATE 4/15/03

5289

PAY TO THE ORDER OF Florida Department of State

One hundred fifty-eight and 15/100

\$ DOLLARS

RBC Centura
 RBC Centura Bank
 Fayetteville, NC 28302

MEMO 2003 Uniform Report
 ANCON INC / SH MARIN INC

PREMIER CHECKING

[Signature]

attachment

80120377
 7# P93000028928

DEPARTMENT OF STATE
 FOR DEPOSIT ONLY
 ACCT # 109168786
 APR 27 2003