

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 07, 2002 8:00 am
Secretary of State

02-07-2002 90161 008 ***158.75

DOCUMENT # P93000051020

1. Entity Name

CANTEK USA MICRO CORPORATION

Principal Place of Business

**1407 TAHOE CT.
 LAKE WORTH FL 33461**

Mailing Address

**1407 TAHOE CT.
 LAKE WORTH FL 33461**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4803 Georgia Ave
 Suite, Apt. #, etc.

3. Mailing Address

4803 Georgia Ave
 Suite, Apt. #, etc.

City & State

West Palm Bch FL

City & State

West Palm Bch FL

4. FEI Number

65-0847025

Applied For

Not Applicable

Zip

33405

Country

Palm Bch

Zip

33405

Country

Palm Bch

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CANTON, WILLIAM
 1407 TAHOE CT.
 LAKE WORTH FL 33461**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2002 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

TITLE	P	<input type="checkbox"/> Delete
NAME	CANTON, WILLIAM FRANK	
STREET ADDRESS	1407 TAHOE COURT	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE	V	<input type="checkbox"/> Delete
NAME	ROSEN, JACK JOSEPH	
STREET ADDRESS	1407 TAHOE COURT	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE	S	<input type="checkbox"/> Delete
NAME	ROSEN, CLAIRE MARIE	
STREET ADDRESS	1407 TAHOE COURT	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE	T	<input type="checkbox"/> Delete
NAME	CANTON, GAYLE MARIE	
STREET ADDRESS	1407 TAHOE COURT	
CITY-ST-ZIP	LAKE WORTH FL 33461	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Gayle Canton

Date

1/22/02

561671 9968
 Daytime Phone #

CR2E034 (9/01)