

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000068331

1. Entity Name

KENTRON, INC.

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90011 024 ***150.00

Principal Place of Business

Mailing Address

132 TRUXTON DRIVE
MIAMI SPRINGS FL 33166
US

132 TRUXTON DRIVE
MIAMI SPRINGS FL 33166-5059

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

1008 Crabtree Close

Suite, Apt. #, etc.

City & State

City & State

Woodstock, GA

Zip

Country

Zip

30188

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0524866

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D CHUN, KENTON M 132 TRUXTON DRIVE MIAMI SPRINGS FL 33166		CHUN, KENTON M 1008 Crabtree Close Woodstock, GA 30188	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:

Kenton M Chun
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/00
Date

779-740-0090
Daytime Phone #

CR2E034 (9/99)