

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000068331

1. Entity Name

KENTRON, INC.

Principal Place of Business

132 TRUXTON DRIVE
MIAMI SPRINGS FL 33166
US

Mailing Address

1008 CRABTREE CLOSE
WOODSTOCK GA 30188
US

2. Principal Place of Business

5905 SW 85th Ave.

3. Mailing Address

1008 Crabtree Close

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Woodstock, GA 30188

Zip

33143

Country

USA

Zip

30188

Country

USA

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

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE FL 32301

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, 2001 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
NAME
STREET ADDRESS
CITY-ST-ZIP

D
CHUN, KENTON M
1008 CRISTREE CLOSE
WOODSTOCK GA 30188

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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

4/3/01
Date

770-740-0090
Daytime Phone #

FILED
Apr 09, 2001 8:00 am
Secretary of State

04-09-2001 90013 047 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)