2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

P96000090180 DOCUMENT

1. Entity Name



FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90072 014 ***150.00

METALFLYTE INDUSTRIES CORP.							
Principal Place of Business 968 HALL PARK DR GREEN COVE SPRINGS FL 32043 US		Mailing Address PO BOX 1700 GREEN COVE SPRINGS FL 32043				#1	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State		City & State			4. FEI Number 59-3412510 Applied For Not Applicable		
Zip Country		Zip	Zip Count			75 Additional Required	
	6. Name and Address of Currer	t Registered Agent			7. Name and Address of New Registered Agen	<u>`</u>	
				Name			
	DONALD W		Street Address		(P.O. Box Number is Not Acceptable)		
	WAY 17 SOUTH . FL 32189						
				City	FL ^z	Zip Code	
	named entity submits this statement tions of registered agent.	for the purpose of changi	ing its registere	ed office or register	red agent, or both, in the State of Florida. I am familia	ar with, and accept	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable.	(NOTE: Registere	d Agent signature required	d when reinstating) DATE		
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department				9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AN	D DIRECTORS	11,		ADDITIONS/CHANGES TO OFFICERS AND DIRE	ECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVT MILLARD, DONALD W PO BOX 339 (N/A) SATSUMA FL 32187	☐ Delete	NAM Stre	_ t		Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAM STRE			Change 🗌 Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLI NAM STRE	E	. 🗖	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 processed.

SIGNATURE:

3-14-03

Daytime Phone #