

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90127 043 ***150.00

DOCUMENT # P97000037848

1. Entity Name
PEXION, INC.

Principal Place of Business

**184 VILLAGE BOULEVARD
JUPITER FL 33458
US**

Mailing Address

**4420 BEACON CIRCLE, STE 100
WEST PALM BEACH FL 33407**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0830119**

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

**WARD III, PHILIP H
4420 BEACON CIRCLE
STE 100
WEST PALM BEACH FL 33407**

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **P** ☐ Delete
NAME **LINGJAERDE, TOR**
STREET ADDRESS **184 VILLAGE BLVD**
CITY-ST-ZIP **JUPITER FL 33458**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **WARD III, PHILIP H**
STREET ADDRESS **4420 BEACON CIRCLE, #100**
CITY-ST-ZIP **WEST PALM BEACH FL 33407**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 persons empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/8/02

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

979785

PEXION, INC.

184 Village Boulevard
Jupiter, Florida 33458

P97000037848

Philip H. Ward, III

September 9, 2002

Via U.S. Priority Mail

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Pexion, Inc.
Document# P97000037848

Dear Sir or Madam:

I have enclosed with this letter the Uniform Business report for Pexion, Inc. along with a check in the amount of \$150.00 to cover the cost of filing. We never received the Uniform Business Report and therefore respectfully request that the late fee be waived. If you need more information, please contact Roger Stanton at (561) 842-3000. Thank you for your attention to this matter.

Very truly yours,



Philip H. Ward, III