

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000012214

1. Entity Name

CHROMALUX, INC.

**FILED**  
**Jan 24, 2001 8:00 am**  
**Secretary of State**

01-24-2001 90047 043 \*\*\*150.00

Principal Place of Business

3842 S. HOPKINS AVENUE  
TITUSVILLE FL 32780  
US

Mailing Address

3842 S. HOPKINS AVENUE  
TITUSVILLE FL 32780  
US

2. Principal Place of Business

3846 S. Hopkins Ave.  
Suite, Apt. #, etc.

3. Mailing Address

3846 S. Hopkins Ave.  
Suite, Apt. #, etc.

City & State

Titusville, FL

Zip

32780

Country

US

City & State

Titusville, FL

Zip

32780

Country

US

4. FEI Number

59-3493667

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MOLITOV, ROGER J  
3842 S. HOPKINS AVENUE  
TITUSVILLE FL 32780

7. Name and Address of New Registered Agent

Name

Molitor, ROGER J.

Street Address (P.O. Box Number is Not Acceptable)

3846 S. Hopkins Ave

City

Titusville

FL

Zip Code

32780

8. The above named entity admits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

*[Signature]*  
Signature, typed or printed name of registered agent and not applicable.

Roger J. Molitor

1-9-00

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 ☐ Delete  
NAME P  
STREET ADDRESS MOLITIV, ROGER J  
CITY-ST-ZIP 3842 S. HOPKINS AVENUE  
TITUSVILLE FL 32780

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

TITLE ☐ Change ☐ 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

Roger J. Molitor, Pres. 1-9-00

Date

321-269-6441

Daytime Phone #

CR2E034 (10/00)