

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90144 020 ***150.00

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1. Entity Name
MATIKAS INSURANCE & FINANCIAL SERVICES, INC.



Principal Place of Business
**101 N. FEDERAL HWY. STE. F
BOCA RATON FL 33432**

Mailing Address
**1266 SOUTH MILITARY TRAIL
#562
DEERFIELD BEACH FL 33442**



2. Principal Place of Business

**730 S. BANANA RIVER DR
Suite, Apt. #, etc.
Merritt Island**

3. Mailing Address

**730 S. BANANA RIVER DR
Suite, Apt. #, etc.
Merritt Island FL**

☒ CHECK HERE IF MAKING CHANGES

City & State

FLORIDA

City & State

Merritt Island FL

4. FEI Number **65-0837205**

Applied For
Not Applicable

Zip

32952

Country

USA

Zip

32952

Country

USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MATIKAS, NICHOLAS
101 N. FEDERAL HWY. STE. F
BOCA RATON FL 33432**

7. Name and Address of New Registered Agent

Name **Matikas Nicholas**
Street Address (P.O. Box Number is Not Acceptable)
730 S. BANANA RIVER DRIVE
City **Merritt Island FL** Zip Code **32952**

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **MATIKAS, NICHOLAS**
STREET ADDRESS **1266 S MILITARY TRL #562**
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **MATIKAS, NICHOLAS**
STREET ADDRESS **730 S. BANANA RIVER DRIVE**
CITY-ST-ZIP **MERRITT ISLAND FL 32952**

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

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

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

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 empowered.

SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)