

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90032 047 ***150.00

DOCUMENT # P98000061746

1. Entity Name

MEM BUSINESS SERVICES, INC.

Principal Place of Business

**11450 SW 83 TERRACE
MIAMI FL 33173**

Mailing Address

**11450 SW 83 TERRACE
MIAMI FL 33173**

00036604



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

11 Snowy Owl Terrace

3. Mailing Address

11 Snowy Owl Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Plantation, FL

City & State

Plantation, FL

4. FEI Number

65-0851938

Applied For

Not Applicable

Zip

33324

Country

USA

Zip

33324

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MATUSON, MARIA
11450 S.W. 83RD TERRACE
MIAMI FL 33173**

7. Name and Address of New Registered Agent

Name
Maria Matuson

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

11 Snowy Owl Terrace

City

Plantation

FL

Zip Code

33324

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

Maria Matuson

4/11/01

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 **D** ☐ Delete
NAME **MATUSON, MARIA**
STREET ADDRESS **11450 SW 83 TERRACE**
CITY-ST-ZIP **MIAMI FL 33173**

TITLE **D** ☐ Delete
NAME **MATUSON, STEVEN G**
STREET ADDRESS **11450 SW 83RD TERRACE**
CITY-ST-ZIP **MIAMI FL 33173**

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 **11 Snowy Owl Terrace**
CITY-ST-ZIP **Plantation, FL 33324**

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STREET ADDRESS **11 Snowy Owl Terrace**
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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:

Maria Matuson, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/01
Date

Daytime Phone #

CR2E034 (10/00)