

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000011037

1. Entity Name
PAYNES INTERNATIONAL, INC.

FILED
Sep 01, 2000 8:00 am
Secretary of State

09-01-2000 90062 049 ***550.00

Principal Place of Business

1401 S.E. 15TH STREET, SUITE 218
FT. LAUDERDALE FL 33316

Mailing Address

1401 S.E. 15TH STREET, SUITE 218
FT. LAUDERDALE FL 33316

00083152



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7300 W. CAMINO REAL

Suite, Apt. #, etc.

#126

City & State
BOCA RATON, FL

Zip
33433

Country
USA

3. Mailing Address

7300 W. CAMINO REAL #126

Suite, Apt. #, etc.

BOCA RATON

City & State

FL

Zip
FL 33433

Country
USA

4. FEI Number

65-0890557

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SELBY, MATT
7300 W. CAMINO REAL, #126
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

M. SELBY

(NOTE: Registered Agent signature required when reinstating)

DATE

7/11/00

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, 2000 Min. 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
PRESIDENT
CATHERINE MASON
7300 W. CAMINO REAL #126
BOCA RATON FL 33433

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

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

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

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

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

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

M. SELBY

Date

7/11/00

Daytime Phone #

561 750 0744