

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 90875 018 ***158.75

DOCUMENT #

1. Entity Name **MAIDBROOK INC.**
P99000020402

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

15000 S. SPUR DR.
Suite, Apt. #, etc.

3. Mailing Address

15000 S. SPUR DR.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

650902339

Applied For

Not Applicable

Zip

33161

Country

USA

Zip

33161

Country

USA

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

RODNEY KING

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

15000 S. SPUR DR.

City

MIAMI

FL

Zip Code

33161

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.

(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)

January - May Fee is \$150.00

After May Fee is \$550.00

Amount of UBR is \$61.25

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 | D STEPHEN POTEI 15000 S. SPUR DR MIAMI FL 33161 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D RODNEY C. KING 15000 S. SPUR DR MIAMI FL 33161 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D MICHELE J POTEI 15000 S. SPUR DR MIAMI FL 33161 |
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

RODNEY C KING

4/29/02

305-354-3434

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #