

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 21, 2007 08:00 AM
Secretary of State

DOCUMENT # P99000034245

1. Entity Name
MAYUSA FLORIDA, INC.



Principal Place of Business
1760 BRISTOL RD.
WARRINGTON, PA 18976

Mailing Address
PO BOX 160
WARRINGTON, PA 18976



01032007 No Chg-P CR2E034 (11/05)

4. FEI Number
23-3000443

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HARRIS, STEPHEN B
1065 MAITLAND CENTRE COMMONS STE 400
MAITLAND, FL 32751

DO NOT WRITE
IN THIS SPACE

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.

STEPHEN B. HARRIS

(NOTE: Registered Agent signature required when reinstating)

DATE

1/5/07

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000674279
03/29/07-80064-007 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HARRIS, STEPHEN B
STREET ADDRESS	1760 BRISTOL RD.
CITY-ST-ZIP	WARRINGTON, PA 18976
TITLE	S
NAME	STURN, GREGORY L
STREET ADDRESS	1760 BRISTOL ROAD PO BOX 160
CITY-ST-ZIP	WARRINGTON, PA 18976
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/07

25343 9060