

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90176 006 ***150.00

DOCUMENT # P99000066129

1. Entity Name
MAILFLOW TECHNOLOGIES, INC.

Principal Place of Business

~~6157 NW 167TH STREET, SUITE F-12~~
~~MIAMI FL 33015~~

Mailing Address

~~6157 NW 167TH STREET, SUITE F-12~~
~~MIAMI FL 33015~~

2. Principal Place of Business

14062 NW 82nd Ave
 Suite, Apt. #, etc.

3. Mailing Address

14062 NW 82nd Ave
 Suite, Apt. #, etc.

City & State

Miami Lakes FL

City & State

Miami Lakes FL

4. FEI Number

65-0936150

Applied For

Not Applicable

Zip

33016

Country

Zip

33016

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WAGANHEIM, ARTHUR B

~~6157 NW 167TH STREET, SUITE F-12~~

~~MIAMI FL 33015~~

7. Name and Address of New Registered Agent

Name

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

14062 NW 82nd Avenue

City

Miami Lakes

FL

Zip Code

33016

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

Arthur B. Waganheim
Arthur B. Waganheim

1/16/02

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, 2002 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 **NGUYEN, PETER**
STREET ADDRESS ~~6157 NW 167TH STREET, F-12~~
CITY-ST-ZIP ~~MIAMI FL 33015~~

TITLE **D** ☐ Delete
NAME **WAGANHEIM, ARTHUR B**
STREET ADDRESS ~~6157 NW 167TH STREET, F-12~~
CITY-ST-ZIP ~~MIAMI FL 33015~~

TITLE **D** ☐ Delete
NAME **PUJOL, EMERITO**
STREET ADDRESS ~~6157 NW 167TH STREET, F-12~~
CITY-ST-ZIP ~~MIAMI FL 33015~~

TITLE **D** ☐ Delete
NAME **WERNIKOFF, IRA K**
STREET ADDRESS ~~6157 NW 167TH STREET, F-12~~
CITY-ST-ZIP ~~MIAMI FL 33015~~

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
CITY-ST-ZIP

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

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

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

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

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:

Arthur B. Waganheim
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/16/02 826-9446

CR2E034 (9/01)