## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## S33979 **DOCUMENT #**

1. Entity Name

MIXON DOORFRAME & HARDWARE INC.

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**FILED** Apr 14, 2003 8:00 am secretary of State

04-14-2003 90348 038 \*\*\*150.00

Principal Place of Business 5906 TAMPA SHORES BLVD TAMPA FL 33615 US		Mailing Address 5906 TAMPA SHORES BLVD TAMPA FL 33615 US						
2. Principal Place of Business		3. Mailing Address	3. Mailing Address			ii bibli bibli bi	<b>1841 Bileii 1841</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number 59-3066302	Applied For Not Applicable		]
Zip	Country Zip Co		Coun	try	5. Certificate of Status Desired See Requ		litional	1
	6. Name and Address of Curre	nt Registered Agent			7. Name and Address of New Registered A	jent		1
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MIXON, D	EAN C. IPA SHORES BLVD			Street Address	(P.O. Box Number is Not Acceptable)			
								1
TAMPA FI	L 33615			City	FL	Zip Code	9	-
	named entity submits this statement tions of registered agent.	for the purpose of chang	ing its registere	ed office or registe	red agent, or both, in the State of Florida. I am fa	l miliar with,	and accept	1
- Fine obligat	ions of registered agent.				Service Control of the Control of th	- E		ļ
SIGNATURE	Signature, typed or printed name of registered age		MOTE D. Com		d when reinstating) DATE	<u> </u>	4 3.	
	Signature, typed or printed name of registered age	ent and title if applicable.	(NOTE: Registered	d Agent signature require	o when reinstating)			┨
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department				9. Election Campaign Financing Trust Fund Contribution.		<b>0</b> May Be I to Fees	
10.		ID DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTORS	3 IN 11	1
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empe

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP