## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCU 1. Entity N	UMENT # L97	000000463			FILE	n ′	
ſ	MARK SYSTEMS, LC				,		
					00 JAN 14	PM 3: 58	
Principal Pl	lace of Business	Mailing Address			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
10913 NORTH DALE MABRY HWY 10913 NORTH DALE		IABRY HWY		TALLAHASSE	E. FLORIDA		
TAMPA FL	33618	TAMPA FL 33618-4112		,			
						<b> </b>	<b>3/1 2/13/1</b> (4/1 1 <del>1</del> /
2. Principal Place of Business 3.		3. Mailing Address	. Mailing Address			1820 <b>(                                   </b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & St	ate	City & State					
7:	-	Ony a blate		4. FEI	Number <b>59-3445595</b>	<u> </u>	Applied For
Zip	Country	Zip	Country	5. Cert	ificate of Status Desired	□ \$5.00 A	dditional
	6. Name and Address of Curr	rent Registered Agent		7. Nam	e and Address of New Regi	Fee Requi	red
GRANAGHAN, PATRICK T 10913 NORTH DALE MABRY HWY			Name	<u>ع د د ند ند</u>			
			Street	Address (P.O. Box )	(P.O. Box Number is Not Acceptable)		
TAMPA F	FL 33618				<del></del>		
			City	<del> </del>		FL Zip Co	de
8. The above	e named entity submits this statemen	nt for the purpose of changing its	ts registered office	or registered agent,	or both, in the State of Florida	<u> </u>	
	e named entity submits this statemen	nt for the purpose of changing it	ts registered office	or registered agent,	or both, in the State of Florida		_
8. The above				or registered agent,		DATE '	
		gent and title if applicable. (NO)	TE: Registered Agent sign	ature required when reinstati		l.	
		gent and title if applicable. (NOT		ature required when reinstati		l.	
	Signature, typed or printed name of registered a	gent and title if applicable. (NOT	TE: Registered Agent sign	ature required when reinstati	ng)	DATE '	
SIGNATURE  9.	Signature, typed or printed name of registered a	gent and title if applicable. (NOT	IOW!!! FEE IS ayable to Depar	\$50.00 tment of State	ADDITIONS/CHA	DATE '	E Addition
9. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered a	gent and title if applicable. (NOT FILE N Make Check Pa	IOW!!! FEE IS ayable to Depar	\$50.00 tment of State	ADDITIONS/CHA	DATE '	<b>₽</b> Addition
9. Title NAME STREET ADDRESS CITY- ST- ZIP	MANAGING MEM  MEM  BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618	FILE N Make Check Pa MBERS/MEMBERS	IOW!!! FEE IS ayable to Depar	\$50.00 tment of State  MEM SHERRY 193 C.FA	ng)	DATE '	Z Addition
9. TITLE NAME STREET ADDRESS	MANAGING ME  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618 MEM	gent and title if applicable. (NOT FILE N Make Check Pa	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$50.00 tment of State  MEM SHERRY 193 C.FA	ADDITIONS/CHA	DATE '	<u></u>
9. TITLE MAME STREET ADDRESS CITY- 81- ZIP TITLE MAME STREET ADDRESS	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	FILE N Make Check Pa MBERS/MEMBERS	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	sture required when reinstate \$50.00 tment of State  MEM SHERRY 193 G. FA PENSACOLA	ADDITIONS/CHA  C. BRAUN IRFICLE DL.  4, FL 32503	ANGES Change	
9. TITLE MAME STREET ADDRESS CITY- ST- ZIP TITLE MAME	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A	Make Check Pa	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	sture required when reinstate \$50.00 tment of State  MEM SHERRY 193 G. FA PENSACOLA	ADDITIONS/CHA  G. BRAUN IKFICLO OL.  F. FL 32503  8000310 -01/21/00	ANGES Change	Addition
9. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS ZITY- ST- ZIP TITLE	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	FILE N Make Check Pa MBERS/MEMBERS	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	sture required when reinstate \$50.00 tment of State  MEM SHERRY 193 G. FA PENSACOLA	ADDITIONS/CHA  C. BRAUN IRFICLE DL.  4, FL 32503	ANGES Change	Addition
9. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADCRESS ZITY- ST- ZIP	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	Make Check Pa	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$50.00 tment of State  ##################################	ADDITIONS/CHA  G. BRAUN IKFICLO OL.  F. FL 32503  8000310 -01/21/00	ANGES Change	Addition
9. TITLE MAME STREET ADDRESS GITY- ST- ZIP TITLE MAME STREET ADDRESS CITY- ST- ZIP TITLE MAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	Make Check Pa	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$50.00 tment of State  ##################################	ADDITIONS/CHA  G. BRAUN IKFICLO OL.  F. FL 32503  8000310 -01/21/00	ANGES Change Change Change 15738-	☐ Addition  — 5 0 ☐ Dightton
9. TITLE MAME STREET ADDRESS CITY- ST- ZIP TITLE MAME STREET ADDRESS CITY- ST- ZIP TITLE MAME STREET ADDRESS CITY- ST- ZIP	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS  Detects  Detects	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	\$50.00 tment of State  ##################################	ADDITIONS/CHA  G. BRAUN IKFICLO OL.  F. FL 32503  8000310 -01/21/00	ANGES Change	Addition
9. TITLE MAME STREET ADDRESS GITY-ST-ZIP TITLE MAME	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS  Detects  Detects	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$50.00 tment of State  ##################################	ADDITIONS/CHA  G. BRAUN IKFICLO OL.  F. FL 32503  8000310 -01/21/00	ANGES Change Change Change 15738-	☐ Addition  — 5 0 ☐ Dightton
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADCRESS CITY-ST-ZIP TITLE IAME TREET ADDRESS ITY-ST-ZIP TITLE IAME TREET ADDRESS ITY-ST-ZIP TITLE IAME TREET ADDRESS	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS  Detects  Detects	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$50.00 tment of State  ##################################	ADDITIONS/CHA  G. BRAUN IKFICLO OL.  F. FL 32503  8000310 -01/21/00	ANGES Change Change Change 15738-	☐ Addition  — 5 0 ☐ Dightton
9. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS LITY- ST- ZIP TITLE IAME ITTLE IAME ITTLE IAME TREET ADDRESS ITY- ST- ZIP TITLE AME TREET ADDRESS	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	Make Check Pa  Make Check Pa  MBERS/MEMBERS  Detects  Detects  Detects	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE AMME STREET ADDRESS CITY-ST-ZIP TITLE AMME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$50.00 tment of State  ##################################	ADDITIONS/CHA  G. BRAUN IKFICLO OL.  F. FL 32503  8000310 -01/21/00	ANGES Change Change Change Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE IAME STREET ADDRESS CITY- ST- ZIP TITLE IAME TREET ADDRESS ITY- ST- ZIP TITLE IAME TREET ADDRESS ITY- ST- ZIP TITLE IAME TREET ADDRESS ITY- ST- ZIP TITLE IAME TREET ADDRESS ITY ST- ZIP	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS  Delete  Delete  Delete	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	\$50.00 tment of State  ##################################	ADDITIONS/CHA  G. BRAUN IKFICLO OL.  F. FL 32503  8000310 -01/21/00	ANGES Change Change Change Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS LITY- ST- ZIP TITLE IAME ITTLE IAME ITTLE IAME TREET ADDRESS ITY- ST- ZIP TITLE AME TREET ADDRESS	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	Make Check Pa  Make Check Pa  MBERS/MEMBERS  Detects  Detects  Detects	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$50.00 tment of State  ##################################	ADDITIONS/CHA  G. BRAUN IKFICLO OL.  F. FL 32503  8000310 -01/21/00	ANGES Change Change Change Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE TREET ADDRESS	MANAGING MEI  MEM BRAUN, L. ERICH 10913 NORTH DALE MABRY TAMPA FL 33618  MEM SWAN, TERRELL A 409 1ST STREET	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS  Delete  Delete  Delete	IOW!!! FEE IS ayable to Depar  10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	\$50.00 tment of State  ##################################	ADDITIONS/CHA  G. BRAUN IKFICLO OL.  F. FL 32503  8000310 -01/21/00	Change  Change  Change  Change	Addition

SIGNATURE RECTURED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER