

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90238 046 ***150.00

0591177

DOCUMENT # P96000068761

1. Entity Name
MARCUS INDUSTRIES, INC.

Principal Place of Business Mailing Address
7051 WEST COMMERCIAL BLVD. **P.O. BOX 10434**
SUITE 3C **SCOTTSDALE AZ 85271-0434**
TAMARAC FL 33319



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
6836 E Sheeva dr **P.O. Box 10434**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State 4. FEI Number Applied For
Scottsdale AZ **Scottsdale AZ** **65-0692738** Not Applicable
 Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required
85254 **USA** **85271-0434** **USA** \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent
CORPORATION COMPANY OF MIAMI
201 SOUTH BISCAYNE BOULEVARD
1600 MIAMI CENTER
MIAMI FL 33131
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCUS, PHILIPPE 8533 E. PORTLAND SCOTTSDALE AZ 85257-4121 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCUS Philippe P.O. Box 10434 Scottsdale AZ 85257-4121 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCUS, VALERIE 8533 E. PORTLAND SCOTTSDALE AZ 85257-4121 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCUS VALERIE P.O. Box 10434 Scottsdale AZ 85257-4121 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Philippe Marcus Philippe MARCUS 4/17/01 480-257-0495
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)