

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 25, 2002 8:00 am**  
**Secretary of State**

02-25-2002 90023 010 \*\*\*150.00

00033941



DO NOT WRITE IN THIS SPACE

**DOCUMENT # P99000005681**

1. Entity Name  
**MARTL INTERNATIONAL CORP.**

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Principal Place of Business      Mailing Address  
~~6216 NW 24TH ST~~      ~~PO BOX 811492~~  
~~BOCA RATON FL 33434-4315~~      ~~BOCA RATON FL 33481~~

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2. Principal Place of Business      3. Mailing Address  
**1819 NE 25 STREET**      **2409 NE 27 STREET**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

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City & State      City & State  
**LIGHTHOUSE POINT, FL**      **LIGHTHOUSE POINT, FL**

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Zip      Country      Zip      Country  
**33064**      **USA**      **33064**      **USA**

4. FEI Number      Applied For  
**65-0905750**      Not Applicable

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

6. Name and Address of Current Registered Agent  
**MARTL, NADA**  
~~6216 NW 24TH ST~~      **2409 NE 27 STREET**  
~~BOCA RATON FL 33434-4215~~      **LIGHTHOUSE POINT**  
**FL 33064**

7. Name and Address of New Registered Agent  
 Name      **MARTL, NADA**  
 Street Address (P.O. Box Number is Not Acceptable)  
**2409 NE 27 STREET**  
 City      **LIGHTHOUSE POINT FL**      Zip Code      **33064**

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      *Nada Martl*      **NADA MARTL, PRESIDENT/DIRECTOR**      **Feb 13, 2002**  
Signature, typed or printed name of registered agent and title if applicable.      (NOTE: Registered Agent signature required when reinstating)      DATE

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, 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MARTL, NADA</b> ✓ <del>6216 NW 24TH ST</del> <b>2409 NE 27 ST</b> <del>BOCA RATON FL 33434</del> <b>LIGHTHOUSE POINT</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>MAERTL, CHRISTIAN</b> ✓ <b>6216 NW 24TH ST</b> <b>BOCA RATON FL 33434-4315</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:      *Nada Martl*      **REQUIRED**      **Feb 13, 2002**      **561-866-5115**  
Signature and typed or printed name of signing officer or director      Date      Daytime Phone #

CR2E034 (9/01)