

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90476 038 ***158.75

DOCUMENT # P99000061170

1. Entity Name

BMARK, INC.

Principal Place of Business

**1519 AQUEDUCT LANE
 KEY LARGO FL 33037**

Mailing Address

**1519 AQUEDUCT LANE
 KEY LARGO FL 33037**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

APPLIED FOR

Applied For

65-0986274

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FILINGS, INC.

3732 N.W. 16TH STREET

FT. LAUDERDALE FL 33311-4132

Name

WILLIAM T. MARKEY

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

1519 Aqueduct Lane

City

KEY LARGO,

FL

Zip Code
33037

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

William T. Markey

(NOTE: Registered Agent signature required when reinstating)

WILLIAM T. MARKEY 3/13/01

DATE

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, 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 **D** ☐ Delete
 NAME **MARKOWITZ, ROBERT**
 STREET ADDRESS **12601 S.DIXIE HIGHWAY, SUITE 401A**
 CITY-ST-ZIP **MIAMI FL 33156**

TITLE **PRES-D** ☒ Change ☐ Addition
 NAME **MARKOWITZ, ROBERT**
 STREET ADDRESS **12601 S.Dixie Highway, Suite 401A**
 CITY-ST-ZIP **MIAMI, FL. 33156**

TITLE **D** ☐ Delete
 NAME **MARKEY, BILL**
 STREET ADDRESS **1519 AQUEDUCT LANE**
 CITY-ST-ZIP **KEY LARGO FL 33037**

TITLE **vp-D** ☒ Change ☐ Addition
 NAME **MARKEY, WILLIAM T.**
 STREET ADDRESS **1519 Aqueduct Lane**
 CITY-ST-ZIP **KEY LARGO, FL. 33037**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **SECT-TREAS**
 NAME **MARKEY, JUDITH A.**
 STREET ADDRESS **1519 Aqueduct Lane**
 CITY-ST-ZIP **KEY LARGO, FL. 33037**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
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TITLE ☐ Delete
 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 another like empowered.

SIGNATURE:

William T. Markey

WILLIAM T. MARKEY 3/13/01

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (10/00)

0116080