

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2001 8:00 am
Secretary of State

04-09-2001 90028 037 ***150.00

DOCUMENT # 399230

1. Entity Name
SGAMAR, INC.

Principal Place of Business
**6230-4 WEST INDIANTOWN RD.
JUPITER FL 33458**

Mailing Address
**C/O KENNETH GILLESPIE
13205 US 1 STE 502
JUNO BEACH FL 33408
US**

ROY WILEY

2. Principal Place of Business

3. Mailing Address

21 N HEPBURN AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

20

City & State

City & State ~
JUPITER FL

Zip

Country

Zip

33458

Country

U.S.A.

4. FEI Number **59-1385783**

Applied For
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

**GILLESPIE, KENNETH
13205 US HWY 1
#502
JUNO BEACH FL 33408**

Name **Roy Wiley**

Street Address (P.O. Box Numbers Not Acceptable)
21 N. Hepburn Ave, Ste 20

City **JUPITER**

FL

Zip Code **33458**

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 **Roy Wiley**

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. (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 **PD** ☐ Delete
NAME **MARCHESANI, JEAN**
STREET ADDRESS **2403 N WALLER DR**
CITY-ST-ZIP **LAKE PARK FL 33410**

TITLE **V.D.M.** ☐ Change ☐ Addition
NAME **MARCHESANI DOMINIC D**
STREET ADDRESS **2403 N WALLER DR**
CITY-ST-ZIP **LAKE PARK FL 33410**

TITLE **TDM** ☒ Delete
NAME **MARCHESANI, JOSEPH M**
STREET ADDRESS **407 LAKEWOOD CR., #5-C**
CITY-ST-ZIP **LAKE PARK FL 33458**

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 all other like empowered.

SIGNATURE: **JEAN M. MARCHESANI**
Jean M. Marchesani
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/01 **561-746-9191**
Date Daytime Phone #

CR2E034 (10/00)