

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 315002

Entity Name: MARK & SON INC.

FILED  
Jan 23, 2005  
Secretary of State

## Current Principal Place of Business:

2512 SE AMHERST  
PT SALERNO, FL 34992 US

## New Principal Place of Business:

5200 NW 43 ST  
STE 102 PMB 169  
GAINESVILLE, FL 32606 US

## Current Mailing Address:

5200 NW 43 ST  
STE 102-PMB 169  
GAINESVILLE, FL 32606 US

## New Mailing Address:

FEI Number: 59-1162137      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARK, ALLEN  
2512 AMHERST ST.  
STUART, FL 34994 US

## Name and Address of New Registered Agent:

MARK, ALLEN  
5200 NW 43 ST  
STE 102 PMB 169  
GAINESVILLE, FL 32606 US

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: ALLEN MARK

01/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVD ( ) Delete  
Name: MARK, ALLEN,  
Address: 5200 NW 43 ST STE 102-169  
City-St-Zip: GAINESVILLE, FL 32606

Title: S ( ) Delete  
Name: MARK, ALLEN,  
Address: 5200 NW 43 ST STE 102-169  
City-St-Zip: GAINESVILLE, FL 32606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change ( ) Addition  
Name: MARK, ALLEN  
Address: 5200 NW 43 ST STE 102-169  
City-St-Zip: GAINESVILLE, FL 32606

Title: S (X) Change ( ) Addition  
Name: MARK, ALLEN  
Address: 5200 NW 43 ST STE 102-169  
City-St-Zip: GAINESVILLE, FL 32606

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLEN MARK

PRES

01/23/2005

Electronic Signature of Signing Officer or Director

Date