

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 381071

1. Entity Name

SHOES BY JULES MARCUS, INC.

FILED

Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90272 013 ***150.00

Principal Place of Business

1765 NO UNIVERSITY DR
PLANTATION FL 33322

Mailing Address

1765 NO UNIVERSITY DR
PLANTATION FL 33322

818588



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

FT Lauderdale

4. FEI Number

59-1346703

Applied For

Not Applicable

Zip

Country

Zip

Country

33331

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

MARCUS, JULES

1765 NO UNIVERSITY DR
PLANTATION FL 33322

Name

Jay Marcus

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

5190 S.W. 163 Avenue

City

FT Lauderdale

FL

Zip Code

33331

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

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.

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME MARCUS, JULES
STREET ADDRESS 1021 LINCOLN ROAD
CITY-ST-ZIP MIAMI BEACH FL

☒ Delete

TITLE SD
NAME MARCUS, JUDY
STREET ADDRESS 1021 LINCOLN ROAD
CITY-ST-ZIP MIAMI BEACH FL

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE P
NAME Jay Marcus
STREET ADDRESS 5190 SW 163 Avenue
CITY-ST-ZIP FT Lauderdale, FL 33331

☐ Change

☒ Addition

TITLE VP
NAME Donna Marcus
STREET ADDRESS 5190 SW 163 Avenue
CITY-ST-ZIP FT Lauderdale, FL 33331

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/01 954-346-7288

Date

Daytime Phone #

CR2E034 (10/00)