2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

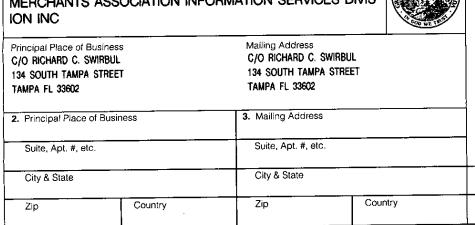
416202



Feb 14, 2003 8:00 am Secretary of State 02-14-2003 90239 048 ***150.00

FILED

DOCUMENT#	410202	
1. Entity Name MERCHANTS ASSOCIATIO ON INC	ON INFORMATION SERVICES DIVIS	
Dringing Place of Rusiness	Mailing Address	



134 SOUTH TAMPA STREET TAMPA FL 33602		134 SOUTH TAMPA STREET TAMPA FL 33602										
2. Principal Place of Business 3. Mailir			3. Mailing A	ailing Address				1 (68)	E DE 116 A POR 1016 E PO 1110 E I)	E1) 6(1)) (4.5)
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES						
City & State			City & State				4. FEI Number	59-14485	85		oplied For ot Applicable	
Zip		Country	Zip Countr			try	į.	5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name	and Address of Current	Registered Ag	ent				7. Name and /	ddress of Ne	w Registere	d Agent	
SWIRBUL, 134 SOUTI TAMPA FL	RICHARD H TAMPA	C.			-	Name Street Ac	dress (P.0	GUEZ, PE D. Box Number GOUTH TAN	is Not Accepta	able) ET		
						City	TAMPA		-	F	_ 330	502
8. The above the obligati	ions of regisi	y submits this statement for the statement for t	K.	PRI	SIDE	CODETEC	ر کار 	K.	, in the State o	f Florida. 1 a		and accept
After Make Check	r May 1, 20	II, FEE IS \$150.00 03 Fee will be \$550.00 o Florida Department o			1 11.			Trus	etion Campaign It Fund Contrib	oution.		00 May Be d to Fees
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CURTIS, F 134 SOUT TAMPA FI	TH TAMPA STREET	DIRECTORS	☐ Delete	TITU NAM STRE	-		Abbinoid	JINIGES 10	0111021107	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S	CAROL JO MPA ST		☐ Delete	- 1					والمستنية ومسترسته	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCMULLE	EN, JOHN S TH TAMPA STREET		☐ Delete					-		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOOS, RG 19321-C			☐ Delete	1					`	☐ Change	Addition
TITLE NAME	Р	, RICHARD	 	Delete	TITL		P RODR 134	IGUEZ, P SOUTH TA	ETER MPA STRI	ET	☐ Change	Addition

STREET ADDRESS 200 N TAMPA ST #118 STREET ADDRESS CITY-ST-ZIP tampa fl CITY-ST-ZIP 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 10 or Block 11 if changed, or on an attachment with an officer or block 11 if the proposed of the corporation of the receiver or trustee empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TAMPA, FLORIDA

SIGNATURE:

134 SOUTH TAMPA STREET

TAMPA FL

KRATT, MICHAEL I

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

IREPRESIDENT

☐ Delete

1/24/03

813 273-7705

☐ Change

☐ Addition

Daytime Phone #

CR2E034 (10/02)