

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90034 048 ****61.25

DOCUMENT # 745438

1. Entity Name

MARIALA III, INC.



Principal Place of Business

**7015 BERACASA WAY
STE 204
BOCA RATON FL 33433
US**

Mailing Address

**7015 BERACASA WAY
STE 204
BOCA RATON FL 33433
US**

2. Principal Place of Business

3. Mailing Address

20975 Pinar Trail

20975 Pinar Trail

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton FL

City & State

Boca Raton FL

Zip

33433

Country

USA

Zip

33433

Country

USA

4. FEI Number **59-2043056**

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

**HEIMBERG, PAUL E
7015 BERACASA WAY
STE 204
BOCA RATON FL 33433**

Name **Paul E Heimberg**

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

2101 Corporate Blvd - Suite 300

City **Boca Raton**

FL

Zip Code

33431

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **KAHAN, MINDY**
STREET ADDRESS **20975 PINAR TRAIL**
CITY-ST-ZIP **BOCA RATON FL 33433**

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

TITLE **SD** ☐ Delete
NAME **HEIMBERG, DENISE**
STREET ADDRESS **20982 PINAR TRAIL**
CITY-ST-ZIP **BOCA RATON FL 33433**

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

TITLE **TD** ☐ Delete
NAME **KAHAN, BRIAN**
STREET ADDRESS **20982 PINAR TRAIL**
CITY-ST-ZIP **BOCA RATON FL 33433**

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

TITLE ☐ Delete
NAME ☐ Delete
STREET ADDRESS ☐ Delete
CITY-ST-ZIP ☐ Delete

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/3/03

801-302-1024

CR2E037 (10/02)