

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR 20 AM 10:49

rf 327100



DO NOT WRITE IN THIS SPACE

DOCUMENT # A97000002309
1. Entity Name
MARKETING WORLDWIDE, LTD.

Principal Place of Business 3089 ENISGLEN DRIVE PALM HARBOR FL 34683	Mailing Address 3089 ENISGLEN DRIVE PALM HARBOR FL 34683-2000
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-3472899	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
**WINZKOWSKI, MICHAEL
3089 ENISGLEN DRIVE
PALM HARBOR FL 34683**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$19,800.00**

10. Amount of Capital Contributions in FLORIDA to date. **19,800.00**

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	P97000089309 MARKETING WORLDWIDE, INC. 3089 ENISGLEN DRIVE PALM HARBOR FL 34683
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13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY - ST - ZIP	300003199079 - - 0 -04/07/00--01002--020 ****228.75 ****228.75
STREET ADDRESS	
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STREET ADDRESS	
CITY - ST - ZIP	

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Michael Winzkowski* **RECH MICHAEL WINZKOWSKI** **3/10/2000** **(727) 785-3130**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/99)