

200 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0013106 AV

DOCUMENT # F00847

1. Entity Name
MERCURY PRINTERS AND PROMOTIONS, INC.



FILED
03 SEP 26 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1010 VIRGINIA DRIVE
C/O MURRAY SCHWARTZ
ORLANDO FL 32803

Mailing Address
1010 VIRGINIA DRIVE
C/O MURRAY SCHWARTZ
ORLANDO FL 32803



REINSTATEMENT 03
☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2030130

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

SCHWARTZ, RICHARD
1010 VIRGINIA DRIVE
ORLANDO FL 32803

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. 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 \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME SCHWARTZ, RICHARD
STREET ADDRESS 1010 VIRGINIA DRIVE
CITY-ST-ZIP ORLANDO FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
700023369597
09/26/03--01081--013 **750.00

TITLE VP
NAME PRITCHARD, RANDALL
STREET ADDRESS 1010 VIRGINIA DR.
CITY-ST-ZIP ORLANDO FL 32803

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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 607, 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 RICHARD SCHWARTZ 9/10/03 (407) 894-5963

Date Daytime Phone #

CR2E034 (4/03)