

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000004297

1. Entity Name

COMMERCIAL MARK SERVICE OF FLORIDA, INC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT -4 AM 11:31

Principal Place of Business

Mailing Address

8299 NW 30th TERR
MIAMI FL 33122-1932

2. Principal Place of Business

8299 NW 30th TERR

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI FL

City & State

4. FEI Number

71-0740470

Applied For

Not Applicable

Zip

33122

Country

Zip

Country

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

JOSEPH I DAVIS, JR
MARKOWITZ, DAVIS, RINGEL & TRUSTY
9013 S DADELAND BLVD STE 1225
MIAMI FL 33156-7849

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

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

(NOTE: Registered Agent signature required when resigning)

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 \$650.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT ☐ Delete
NAME KEITH HOLLAND
STREET ADDRESS 8299 NW 30th TERR
CITY-ST-ZIP MIAMI FL 33122TITLE ☐ Change ☐ Addition
NAME 400003413664-4
STREET ADDRESS -10/04/00--01045--001
CITY-ST-ZIP *****150.00 *****150.00TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
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CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

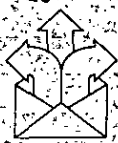
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-3-00

305-599-0330

12.00

Dialing Area



COMMERCIAL MAIL SERVICE
OF FLORIDA, INC.

20F2
8299 NW 30th Terr
Miami, FL 33122-1041
305-599-0330
Fax 305-599-9632

October 3, 2000

Mr. Ray Revell
Division of Corporations
Florida Department of State
409 E Gaines St
Tallahassee FL 32399

Dear Mr. Revell:

Please find enclosed a Form 2000UBR along with a check in the amount of \$150.00.

We did not receive our renewal notice due to a typo by your office when they entered our new street address - 8299 NW "3th" Terr instead of 8299 NW 30th Terr.

Thank you for your help in this matter.

Sincerely,

Keith E. Holland
President

KEH/kc

w/enclosures