

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State

0394786 AV

DOCUMENT # H61205

1. Entity Name
DI MARCO & DI MARCO, INC.

03-07-2002 90034 036 ***150.00

Principal Place of Business 7163 SAINT ANDREWS ROAD LAKE WORTH FL 33467 US	Mailing Address 7163 SAINT ANDREWS ROAD LAKE WORTH FL 33467 US
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **59-2548118** Applied For
 Not Applicable

Zip 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

DI MAROC-MARQUEZ, ELENA
7163 SAINT ANDREWS ROAD
LAKE WORTH FL 33467

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

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 \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. 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	P <input type="checkbox"/> Delete
NAME	DIMARCO, CARMEN J
STREET ADDRESS	CALLE 65A #21A-43
CITY-ST-ZIP	MARACAIBO, VENEZUELA
TITLE	VST <input type="checkbox"/> Delete
NAME	MARQUEZ-DIMARCO, ELENA
STREET ADDRESS	7163 ST. ANDREWS RD.
CITY-ST-ZIP	LAKE WORTH FL
TITLE	V <input type="checkbox"/> Delete
NAME	DIMARCO, JENNY M
STREET ADDRESS	CALLE 65A #21A-43
CITY-ST-ZIP	MARACAIBO, VENEZUELA
TITLE	V <input type="checkbox"/> Delete
NAME	DIMARCO, FRANCESCO JOSE
STREET ADDRESS	CALLE 65A #21A-43
CITY-ST-ZIP	MARACAIBO, VENEZUELA
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 OF ELENA MARQUEZ-DIMARCO, VST 4/15/02 DATE: _____ DAYTIME PHONE #: _____

CR2E034 (9/01)