

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90270 013 ***158.75

DOCUMENT # **J38800.**

1. Entity Name
MARCO POLO, COLUMBUS AND FERRARI, INC.

Principal Place of Business Mailing Address
P.O. BOX 22887 P.O. BOX 22887
LAKE BUENA VISTA FL 32830 LAKE BUENA VISTA FL 32830
US US

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 **59-2757629** Applied for Not Applied for

5. Certificate of Status Desired **\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE


6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

YU, CYNTHIA C/O MA
9101 SR 535, SUITE 300
C/O MARCO POLO, COLUMBUS & FERRARI, INC.
ORLANDO FL 32836

Name
Yu, Cynthia
 Street Address (P.O. Box Number is Not Acceptable)
C/O Marco Polo Columbus & Ferrari, Inc.
9101 S.R. 535, Ste. 300
 City
Orlando Zip Code
32836

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  1/6/01
Signature (typed or printed name of registered agent and date if applicable) (NOTE: Registered Agent signature required when re-instating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (See or for a on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	YING, NELSON C/O MAR	P.O. BOX 22887 (N/A)	LAKE BUENA VISTA FL 32830	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VAS	YING, NELSON JR. C/O	P.O. BOX 22887 (N/A)	LAKE BUENA VISTA FL 32830	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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:  N. Ying 1/4/2001 407-876-1793
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-Number-Year

UBR227U

CR2E034 (10/00)