## 2001 UNIFORM BUSINESS REPORT (UBR)

## Jun 14, 2001 8:00 am DOCUMENT# 丁73132 **Secretary of State** Markle Group INC. 06-14-2001 90013 013 \*\*\*150.00 Principal Place of Business Mailing Address 12082 Siasta Dr Same Fl. Myers Beach Fla A0073222 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59 -1836505 Not Applicable Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Darked E. Markle 12002 Siasta Do Street Address (P.O. Box Number is Not Acceptable) FI. Myers Boach, FTA. 33931 Zio Code FL 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: Recistered Agent pignsture required when reinstating) DATE FILE NOWIN PEE IS \$150 00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing; \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Addition TITLE ☐ Delete TILE ☐ Change Markle Doniel E. 12082 Siesta Dr NAME NAME STREET ADDRESS STREET ADDRESS Fro Myans BEach Flo. 33931 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST. NO TITLE ☐ Delete TITLE ☐ Chance Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ND.E Delete TITLE (Change ☐ Addition NAME MALKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 of 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. Parial E Markla 6/6/01 941-466-7464 SIGNATURE:

FILED

Affachmer PHS 73132 ABU79222

6 May 2001

Division Of Corporations State of Florida P O Box 1500 Tallahassee, Fla. 32302-1500

Please find enclosed a downloaded copy of the completed URB which I filled out today after speaking with your office.

I have also enclosed a copy of the change of address letter and confirmation of transmission from me requesting our address change ;dated Jan 8,2001 and Dec26,2000 respectively.

Since I never received my UBR through the mail due to the address change I am asking a grace period for the filing.

I appreciate your cooperation,

Sincerely

Daniel E. Markle, Pres. The Markle Group In.