

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 OCT 31 PM 5:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDADOCUMENT # **K 31361**

1. Entity Name

CREATIVE MARKETING TECHNIQUES, INC.**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

BROWARD

Suite, Apt. #, etc.

3. Mailing Address

Box 19305

Suite, Apt. #, etc.

City & State

City & State

FDRT LAUDERDALE FL

Zip

Country

Zip

Country

33318**USA**

4. FEI Number

65-0068063

Applied For

Not Applicable

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

7. Name and Address of Current Registered Agent

Name

CHRISTINA M. TOKAR

Street Address (P.O. Box Number is Not Acceptable)

9896 FAIRWAY COVE LANE

City

PLANTATION

FL

Zip Code

33324

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 of the person named in Block 7, and if applicable, the person named in Block 11.

(NOTE: Registered Agent signature required when reappointing)

may 1, 2002

DATE

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

January 1 - May 1: Fee is \$150.00

After May 1: Fee is \$550.00

Amended UBR is \$81.25

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**President
CHRISTINA M. TOKAR
9896 FAIRWAY COVE LNC Plantation, FL 33324**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**Vice President
ANNE P. TOKAR
6115 Kelsey Rd PARMA Ohio 44129**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**Treas. - SECRETARY
CHRISTINA M. TOKAR
Same ADDRESS AS ABOVE**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
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NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with an email, if applicable.

SIGNATURE:

Signature and Printed Name of Signing Officer or Director

Date

Daytime Phone #

CR2E034B (12/01)

7/11/6/02



Attachment

P.O. Box 19305
Fort Lauderdale, FL
33318

T: 954-474-7408

F: 954-4624-8172

E: createmkg@aol.com

871168

#K 31361

May 1, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Uniform Business Report

To whom it may concern:

I am writing to your office for assistance. We did not receive via mail our annual copy of the Uniform Business Report. I checked with your office and they assured me they had been sent, but this is not the case. I will speak with the postmaster pertaining to filing a lost mail report, but, we have not received any documents from you this year.

I went on-line to file our UBR, but filed wrongly the Corporate Document instead, paying \$70 by credit card.

I have enclosed the balance of \$80 for the UBR fee of \$150. Please credit us the \$70 we previously paid. I have attached our on-line verification of said payment.

Please also waive any late fees in the filing of our UBR as without the mailed documents from your office, it slipped our mind. My company is small and I am on the road two to three weeks out of the month.

Thank you for your kind consideration.

Sincerely,


Christina M. Tokar
President