

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # K71603**

1. Entity Name

MARK KING INVESTMENTS, INC.

Principal Place of Business

**5385 PALM AVE., #1
P.O. BOX 2546
HIALEAH FL 33012-7546**

Mailing Address

**PO BOX 22546
HIALEAH FL 33002-2546**

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

65-0118091

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**KURZWEIL, SUETELLE
8641 SW 84TH TERRACE
MIAMI FL 33143**

7. Name and Address of New Registered Agent

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 reinstating)

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 \$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	PD	☐ Delete
NAME	KURZWEIL, SUETELLE	
STREET ADDRESS	8641 SW 84TH TERR.	
CITY-ST-ZIP	MIAMI FL	

TITLE	Secretary	☒ Change ☐ Addition
NAME	Kurzweil, Suetelle	
STREET ADDRESS	8641 SW 84 Terr.	
CITY-ST-ZIP	Miami, FL 33143	

TITLE	VP	☐ Delete
NAME	RICH, KING	
STREET ADDRESS	900 BAY DR., #204	
CITY-ST-ZIP	MIAMI.BCH. FL	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	AS	☐ Delete
NAME	KURZWEIL, JODI L	
STREET ADDRESS	555 NE 34TH STREET #208	
CITY-ST-ZIP	MIAMI FL 33137	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	TD	☐ Delete
NAME	KURZWEIL, SHIRLEY	
STREET ADDRESS	1800 NE 114TH ST., #2110	
CITY-ST-ZIP	N. MIAMI FL	

TITLE	Treasurer	☐ Change ☒ Addition
NAME	Orovitz, Esta K.	
STREET ADDRESS	14020 SW 104 Place	
CITY-ST-ZIP	Miami, FL 33176	

TITLE	SD	☐ Delete
NAME	KURZWEIL, ALAN	
STREET ADDRESS	8641 SW 84TH TERRACE	
CITY-ST-ZIP	MIAMI FL 33143	

TITLE	President	☒ Change ☐ Addition
NAME	Kurzweil, Alan	
STREET ADDRESS	8641 SW 84 Terr.	
CITY-ST-ZIP	Miami, FL 33143	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Vice-President	☐ Change ☒ Addition
NAME	Kurzweil, Howard E.	
STREET ADDRESS	6212 San Vicente	
CITY-ST-ZIP	Coral Gables, FL 33146	

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:

Alan Kurzweil, Pres.

04-02-01

305-822-9555

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0488280



DO NOT WRITE IN THIS SPACE