

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90022 039 ****50.00

DOCUMENT # L00000008054

1. Entity Name
MARFAK, LLC



Principal Place of Business
**1035 GUI SANDO DE AVILA
TAMPA FL 33613**

Mailing Address
**1035 GUI SANDO DE AVILA
TAMPA FL 33613**

2. Principal Place of Business
9625 Wes Kearney Way
Suite, Apt. #, etc.

3. Mailing Address
9625 Wes Kearney Way
Suite, Apt. #, etc.

City & State
Riverview, FL

City & State
Riverview, FL

Zip
33569

Country

Zip
33569

Country

4. FEI Number **59-3658019**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**FELDMAN, DONNA J ESQUIRE
C/O TEW, ZINOBER, BARNES, ZIMMET & UNICE,
2655 MCCORMICK DRIVE
CLEARWATER FL 33759**

7. Name and Address of New Registered Agent

Name
Tracy J. Harris, Jr.

Street Address (P.O. Box Number is Not Acceptable)
9625 Wes Kearney Way

City
Riverview **FL** Zip Code
33569

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Tracy J. Harris, Jr.* **Tracy J. Harris, Jr.** **2/19/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
TAYLOR, TODD
1035 GUI SANDO DE AVILA
TAMPA FL 33613** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
Harris, Tracy J. Jr.
701 Indiana Avenue
Palm Harbor, FL 34683** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
Kearney, Bing
911 Seddon Cove Way
Tampa, FL 33602** ☐ Change ☒ Addition

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

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

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

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Tracy J. Harris, Jr.* **Tracy J. Harris, Jr.** **2/19/03** **(813) 621-7454**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

0034638

CR2E083 (10/02)