3/29/

FILED

May 21, 2002 8:00 am

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## 2002 Uniform Business Report (UBR)

Secretary of State L43621 DOCUMENT # 03-29-2002 91412 022 \*\*\*150.00 1. Entity Name MARVIN & JEAN ALLEN, INC. Mailing Address Principal Place of Business 28161 5637 MADISON ST 5637 MADISON ST HOLLYWOOD FL 33023 HOST YWOOD FL 33023 3. Mailing Address 2. Principal Place of Business 27748 ነገነ የ DO NOT WRITE IN THIS SPACE Sulte, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State 65-0165071 City & State Not Applicable ARAN \$8.75 Additional Country 5. Certificate of Status Desired country Fee Required 3 4 A C A-YE7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ALLEN, JEAN N 5637 MADISON ST **HOLLYWOOD FL 33023** 130 E ARAMA 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. FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 10. Election Campaign Financing 9. This corporation is eligible to satisfy its intangible After May 1, 2002 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Tax filing requirement and elects to do so. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS (9/07) 11. Addition TITLE MARY ALLEN Delete TITLE NAME 27746 S. DIXIE HUY CR2E034 ALLENS, TRACY NAME STREET ADDRESS 27748 S DIXIE HWY NADAUTA FL 38032 STREET ADDRESS CITY-ST-7IP NANANJA FL 33032 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITLE □ Delete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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 except 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 otherlike empowered.