

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 16, 2002 8:00 am**  
**Secretary of State**  
 09-16-2002 90091 048 \*\*\*550.00

**DOCUMENT # P00000020163**

**1. Entity Name**  
**MRB HOLDINGS, INC.**

**Principal Place of Business**  
 1033 ROYAL BIRKDALE DR  
 TARPON SPRINGS FL 34689

**Mailing Address**  
 1033 ROYAL BIRKDALE DR  
 TARPON SPRINGS FL 34689



**2. Principal Place of Business**  
 3477 FOX HUNT DR  
 Suite, Apt. #, etc.

**3. Mailing Address**  
 3477 FOX HUNT DR  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**City & State**  
 PALM HARBOR FL  
**Zip**  
 34683  
**Country**  
 USA

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 PALM HARBOR, FL  
**Zip**  
 34683  
**Country**  
 USA

**4. FEI Number** 65-0984822

**Applied For**  
☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

**MAXSON, CHRIS**  
 1033 ROYAL BIRKDALE DR  
 TARPON SPRINGS FL 34689

**7. Name and Address of New Registered Agent**

**Name** MAXSON, CHRIS

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

3477 FOX HUNT DRIVE

**City** PALM HARBOR **FL** **Zip Code** 34683

**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**

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D BEYER, STEPHEN 2201 CORPORATE BLVD., SUITE 103 BOCA RATON FL 33431	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	P MAXSON, CHRIS 1033 ROYAL BIRKDALE DR TARPON SPRINGS FL 34689	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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**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:** **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/2002 727-420-2010  
 Date Daytime Phone #

CR2E034 (4/02)