

# 2001 UNIFORM BUSINESS REPORT (UBR)

4/17

**FILED**  
**May 22, 2001 8:00 am**  
**Secretary of State**

04-17-2001 90057 040 \*\*\*150.00

**DOCUMENT # P00000026412**

1. Entity Name  
**FORTANZ, INC.**

Principal Place of Business  
**211 GEORGIAN PARK DRIVE**  
**JUPITER FL 33458**

Mailing Address  
**211 GEORGIAN PARK DRIVE**  
**JUPITER FL 33458**

- 45876



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**211 GEORGIAN PK DR**  
 Suite, Apt. #, etc.

3. Mailing Address  
**SAME**  
 Suite, Apt. #, etc.

City & State  
**Jupiter FL**  
 Zip  
**33458** Country  
**USA**

City & State  
**SAME**  
 Zip  
**SAME** Country  
**SAME**

4. FEI Number  
**65-1006446** Applied For  
☐ Not Applicable  
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**FORTIN, MARCUS**  
**211 GEORGIAN PARK DRIVE**  
**JUPITER FL 33458**

7. Name and Address of New Registered Agent  
 Name  
**MARCUS E. FORTIN**  
 Street Address (P.O. Box Number is Not Acceptable)  
**211 GEORGIAN PK DR**  
 City  
**Jupiter** FL Zip Code  
**33458**

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 **MARCUS FORTIN** *[Signature]* **4-15-01**  
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**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VICE PRESIDENT, TREASURER</b> <input checked="" type="checkbox"/> Delete <b>PETER SHANZ</b> <b>10163 ELGIN WAY</b> <b>BRISTON, VA 20136</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRESIDENT SECRETARY</b> <input type="checkbox"/> Delete <b>MARCUS FORTIN</b> <b>211 GEORGIAN PARK DR</b> <b>JUPITER FL 33458</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: **MARCUS FORTIN** *[Signature]* **4-15-01** **(561) 818-9136**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)