

2001 UNIFORM BUSINESS REPORT (UBR)

02-12-2002 90061 011 ***750.00

0084758 AN

DOCUMENT # P00000027091

1. Entity Name

MARKA INTERNATIONAL INVESTMENT CORP.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 MAR 15 PM 4:00

B0019654

Principal Place of Business

301 SOUTHWEST 20TH ROAD
MIAMI F: 33129-1319

Mailing Address

301 SOUTHWEST 20TH ROAD
MIAMI F: 33129-1319

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

65-0993546

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Jose Alvarez

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

301 SW 20 rd

City

Miami

FL

Zip Code

33129

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

Jose Alvarez

Jose Alvarez

January 22, 2002

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 12, 2001 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PSTD
DE LA CRUZ SOTOMAYOR, RAUL H
301 SOUTHWEST 20TH ROAD
MIAMI F: 33129-1319

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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: *Raul H de la Cruz Sotomayor*

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Raul H de la Cruz Sotomayor

1/22/02

Daytime Phone #

REINSTATEMENT
DO NOT WRITE IN THIS SPACE

01-02

CR2E034 (5/01)