## 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED May 16, 2002 8:00 am

Daytime Phone #

DOCUMENT # P00000038387						Secretary of State 05-16-2002 90057 012 ***150.00	
STOP	1 MARKE	TING INC.		,			
Principal P	lace of Busines	s	Mailing Address	<u>.                                    </u>	<del></del>		
4050 THOLLY	W.HALLA WOOD FL	NDALE BLVI 33023	N.MIAMI BE	04TH LANE ACH FL 331	L79		
Principal Place of Business     3. Mailing Address						,	
Suite, Ap	ti <b>.</b>		Suite, Apt. #, etc.		DO NOT W	DO NOT WRITE IN THIS SPACE	
City & State 3			City & State		4. FEI Number 65 - 1008981	Applied For Not Applicab	
Zip 	6 Name and	Country	Zip	Country	5. Certificate of Status Desir	ed \$8.75 Additional	
	v. name and	Address of Current	Registered Agent	Mema	7. Name and Address of Ne	w Registered Agent	
37 T				Name		<del>-</del>	
	E. 2047	TH LANE		Street Add	lress (P.O. Box Number is Not Acce	ptable)	
N.MIAMI BEACH FL 33179				City		Zip Code	
8. The above	e named entity :	submits this statement	for the purpose of changing	g its registered office	or registered agent, or both, in the		
SIGNATURE	. • -		ered agent and title if applicabl	·	red Agent signature required when reinst		
See criter	oration is eligible equirement and ria on back)	e to satisfy its Intangibl elects to do so.	After MAY 1, 20 Make Check Payab	ll FEE IS \$150.00 0 <b>2.</b> Fee will be \$550	10. Election Campaign	Financing \$5.00 May Re	
II. ITLE	ID	OFFICERS AND D		12.	ADDITIONS/CHANGES TO OF	CERS AND DIRECTORS IN 11	
AME Treet address	ALI MI	AH E. 204TH I	Delete	TITLE NAME STREET ADDRESS		Change Addition	
ITY - ST - ZIP	N.MIAM	I BEACH FI	33179	CITY - ST - ZIP			
TLE AME			Delete	TITLE NAME		Change Addition	
TY - ST - ZIP	<u> </u>		- Dilu	STREET ADDRESS CITY - ST - ZIP			
ME REET ADDRESS			]Delete_	NAME STREET ADDRESS		Change Addition	
TY - ST - ZIP FLE	<u> </u>		Delete	CITY - ST - ZIP			
ME REET ADDRESS IY - ST - ZIP				NAME STREET ADDRESS		Change Addition	
LE				CITY - ST - ZIP		,	
ME REET ADDRESS			Delete	TITLE NAME STREET ADDRESS		Change Addition	
Y - ST - ZIP			Delete	STREET ADDRESS CITY - ST - ZIP TITLE			
ME REET ADDRESS Y - ST - ZIP				NAME STREET ADDRESS		Change Addition	
. I hereby cert information i officer or dire	ector of the corp	oration or the receiver	his filing does not qualify fo al report is true and accura or trustee empowered to a ment with an address, with	was the second	d in Section 119.07(3)(i), Florida Sta ure shall have the same legal effect required by Chapter 607, Florida Sta ered.	stutes. I further certify that the as if made under oath; that I am an atutes; and that my name appears	

ALI MIAH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: \_ 04-25-02305-655-9915