

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90076 012 ***150.00

DOCUMENT # P00000038815

1. Entity Name
PMK PSICOMARKETING INTERNATIONAL, INC

Principal Place of Business

361 LAKEVIEW DRIVE
CORAL SPRINGS FL 33071

Mailing Address

361 LAKEVIEW DRIVE
CORAL SPRINGS FL 33071

2. Principal Place of Business

736 TULIP CIRCLE

Suite, Apt. #, etc.

3. Mailing Address

736 TULIP CIRCLE

Suite, Apt. #, etc.

City & State

WESTON FL 33327

City & State

WESTON FL

4. FEI Number

65-1016764

Applied For

Not Applicable

Zip

33327

Country

USA

Zip

33327

Country

USA

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FARLOS, FRANKY
361 LAKEVIEW DRIVE
CORAL SPRINGS FL 33071

7. Name and Address of New Registered Agent

Name

MAURICIO GARCIA

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

736 TULIP CIRCLE

City

WESTON

FL

Zip Code

33327

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

Mauricio Garcia

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, 2002 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	D	☐ Delete
NAME	GARCIA, MAURICIO	
STREET ADDRESS	361 LAKEVIEW DRIVE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	D	☐ Delete
NAME	GARZON, LILIANA	
STREET ADDRESS	361 LAKEVIEW DRIVE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	D	☐ Delete
NAME	GARCIA, LUCY	
STREET ADDRESS	361 LAKEVIEW DRIVE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☒ Change ☐ Addition
NAME	
STREET ADDRESS	736 TULIP CIRCLE
CITY-ST-ZIP	WESTON, FL, 33327
TITLE	☒ Change ☐ Addition
NAME	
STREET ADDRESS	736 TULIP CIRCLE
CITY-ST-ZIP	WESTON FL 33327
TITLE	☒ Change ☐ Addition
NAME	
STREET ADDRESS	736 TULIP CIRCLE
CITY-ST-ZIP	WESTON FL 33327
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

LILIANA GARZON
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04-24-02

954-3895307

CR2E034 (9/01)