

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000065835**

1. Entity Name

MKS CONSULTING INC.**FILED**
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90023 036 ***150.00

Principal Place of Business

**803 136TH STREET EAST
BRADENTON FL 34202**

Mailing Address

**803 136TH STREET EAST
BRADENTON FL 34202**

2. Principal Place of Business

13603 5th Ave N.E.

Suite, Apt. #, etc.

3. Mailing Address

13603 5th Ave. N.E.

Suite, Apt. #, etc.

City & State

Bradenton, FL 34202

City & State

Bradenton, FL 34202Zip
34202

Country

Zip

34202

Country

4. FEI Number

65-1060850

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name
Marolyn StrietelmeierStreet Address (P.O. Box Number is Not Acceptable)
13603 5th Avenue N.E.City
BradentonZip Code
34202

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

Signature, typed or printed name of registered agent and title if applicable.

Marolyn Strietelmeier, President**4/23/01**

(NOTE: Registered Agent's 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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
STRIETELMEIER, MAROLYN K
803 136TH STREET EAST
BRADENTON FL 34202** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marolyn Strietelmeier, president

Date

Daytime Phone #

(941) 504-8950**4/23/01**

CR2E034 (10/00)