

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 09, 2002 8:00 am
Secretary of State

09-09-2002 90009 024 ***550.00

DOCUMENT # P00000069789

1. Entity Name
GOLDMARK BUILDERS, INC.

Principal Place of Business

4025 S CONGRESS AVE. STE 100
BOYNTON BEACH FL 33426

Mailing Address

1025 S CONGRESS AVE. STE 100
BOYNTON BEACH FL 33426

2. Principal Place of Business

2201 W. Atlantic Ave

3. Mailing Address

2201 W. Atlantic Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Delray Bch FL

City & State

Delray Bch FL

Zip

33445

Country

USA

Zip

33445

Country

USA

4. FEI Number

65-1037517

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DAMSKY, GERALD P.A.

621 NW 53RD ST. STE 365
BOCA RATON FL 33487

7. Name and Address of New Registered Agent

Name

Mark Nuccilli

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

2201 W. Atlantic Ave

City

Delray Beach

FL

33445

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Mark Nuccilli

(NOTE: Registered Agent signature required when reinstating)

DATE

9-4-02

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 13, 2002 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

TITLE **CS** ☐ Delete
NAME **GOLDBURG, RONALD W**
STREET ADDRESS **1325 S CONGRESS AVENUE # 100**
CITY-ST-ZIP **BOYNTON BEACH FL 33426**

TITLE **PT** ☐ Delete
NAME **MUCCILLI, MARK G**
STREET ADDRESS **1325 S CONGRESS AVENUE # 100**
CITY-ST-ZIP **BOYNTON BEACH FL 33426**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS **2201 W. Atlantic Ave**
CITY-ST-ZIP **Delray Beach FL 33445**

☒ Change ☐ Addition
TITLE
NAME **Nuccilli, Mark**
STREET ADDRESS **2201 W. Atlantic Ave**
CITY-ST-ZIP **Delray Bch FL 33445**

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

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

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

☐ Change ☐ Addition
TITLE
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:

Mark Nuccilli
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-402 561-330-7155

CR2E034 (4/02)