

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000092110

1. Entity Name

THE MARANA GROUP, INC.

FILED

Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90025 027 ***150.00

Principal Place of Business

Mailing Address

~~G/O GARY D. LIPSON~~
~~9350 S. DIXIE HWY., STE. 1550~~
~~MIAMI FL 33156~~

~~G/O GARY D. LIPSON~~
~~9350 S. DIXIE HWY., STE. 1550~~
~~MIAMI FL 33156~~

101020



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

57 WEST PINE STREET

57 WEST PINE STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 300

SUITE 300

City & State

City & State

ORLANDO, FL

ORLANDO, FL

4. FEI Number

59-3675635

Applied For

Not Applicable

Zip

Country

32801

USA

Zip

Country

32801

USA

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

LIPSON, GARY D
9350 SOUTH DIXIE HIGHWAY
SUITE 1550
MIAMI FL 33156

Name

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

City

FL

Zip Code

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.

(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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D/P
HARRY M. TIMMONS
57 WEST PINE STREET, SUITE 300
ORLANDO, FL 32801

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D/VP/S
MICHAEL LEWIS
57 WEST PINE STREET, SUITE 300
ORLANDO, FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

HARRY M. TIMMONS
PRESIDENT 1/12/01

CR2E034 (10/00)