

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000101881

1. Entity Name

MARVIK, INC.

Principal Place of Business

Mailing Address

1416 NW 8 ST.  
DANIA BEACH FL 33004

1416 NW 8 ST.  
DANIA BEACH FL 33004

2. Principal Place of Business

2137 NW 29 ST

3. Mailing Address

Suite, Apt. #, etc.

City & State

Oakland Park FL

City & State

Zip

33311

Country

Broward

Zip

Country

4. FEI Number

22-3762974

Applied For

Not Applicable

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

KEHOE, JAMES W  
455 FAIRWAY DR., #101  
DEERFIELD BEACH FL 33441

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

*James W Kehoe*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

*1/22/01*

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

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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.

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\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: President  
NAME: marjean Preda  
STREET ADDRESS: 1416 NW 8 ST  
CITY-ST-ZIP: Dania Fl 33004

☐ Delete

TITLE: Secretary/Treasurer  
NAME: Victor Preda  
STREET ADDRESS: 1416 NW 8 ST  
CITY-ST-ZIP: Dania Fl 33004

☐ Delete

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

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STREET ADDRESS:   
CITY-ST-ZIP:

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

☐ Change

☐ Addition

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

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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 or without other like empowered.

SIGNATURE:

*Victor Preda*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VICTOR PREDA

1/22/01

Date

954 777 2700

Daytime Phone #

CR2E034 (10/00)

FILED  
Mar 09, 2001 8:00 am  
Secretary of State

03-09-2001 90011 045 \*\*\*150.00



DO NOT WRITE IN THIS SPACE