

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000 103807

1. Entity Name

MARCNET CORPORATION

Principal Place of Business

Mailing Address

2207 1/2 Summit Boulevard
West Palm Beach, FL 33406

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90359 034 ***150.00

C0068617

2. Principal Place of Business

2207 1/2 Summit Blvd

3. Mailing Address

2207 1/2 Summit Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

West Palm Beach FL

City & State

West Palm Beach, FL

4. FEI Number

65-1053776

Applied For

Not Applicable

Zip

33406

Country

USA

Zip

33406

Country

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

Vanessa Griffin
2255-A Spring Harbor DR
Delray Beach, FL 33445

Name Marc Mulcahy

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

2207 1/2 Summit Blvd

City WPB

FL

Zip Code 33406

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 Marc Mulcahy, President

4/31/01

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

(NOTE: Registered Agent signature required when resigning)

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
And MAY 1, 2001 Fee will be \$350.00
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 President/owner
NAME Marc Mulcahy
STREET ADDRESS 2207 1/2 Summit Blvd
CITY-ST-ZIP West Palm Beach, FL 33406

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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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: Marc Mulcahy

4/31/01 501-310-5980

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)