

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000116998

1. Entity Name

MARCOLE CORP.

DBA STEAMER'S RAW BAR & GRILL

FILED
Mar 02, 2001 8:00 am
Secretary of State

03-02-2001 90082 041 ***150.00

C0028601



DO NOT WRITE IN THIS SPACE

Principal Place of Business
C/O KAYE SCHOLER
777 SOUTH FLAGLER DRIVE #1002 WEST TOWER
WEST PALM BEACH FL 33401
13860 WELLINGTON TRACE, WELLINGTON, FL. 33414

2. Principal Place of Business
STEAMER'S

Suite, Apt. #, etc.
BAY 21 & 22

City & State
WELLINGTON, FL

Zip
33414

Country
USA

Mailing Address
C/O KAYE SCHOLER
777 SOUTH FLAGLER DRIVE #1002 WEST TOWER
WEST PALM BEACH FL 33401
13860 WELLINGTON TR.

3. Mailing Address
13860 WELLINGTON TR.

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number
05-1067367

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

7. Name and Address of New Registered Agent
Name PAUL & SUSAN KINGSTON
Street Address (P.O. Box Number is Not Acceptable)
13860 WELLINGTON TRACE

City WELLINGTON, FL Zip Code 33414

6. Name and Address of Current Registered Agent
M. RICHARD SAPIR
C/O KAYE SCHOLER
777 SOUTH FLAGLER DRIVE #1002 WEST TOWER
WEST PALM BEACH FL 33401

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 *Susan Kingston* Secretary & V.P. DATE 2/15/01
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☐ 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	D	<input type="checkbox"/> Delete	TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KINGSTON, SUSAN		NAME		
STREET ADDRESS	C/O 777 S. FLAGLER DRIVE #1002		STREET ADDRESS	13860 WELLINGTON TRACE	
CITY-ST-ZIP	WEST PALM BEACH FL 33401		CITY-ST-ZIP	WELLINGTON, FL. 33414	
TITLE	D	<input type="checkbox"/> Delete	TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KINGSTON, PAUL		NAME		
STREET ADDRESS	C/O 777 S. FLAGLER DRIVE #1002		STREET ADDRESS	13860 WELLINGTON TRACE	
CITY-ST-ZIP	WEST PALM BEACH FL 33401		CITY-ST-ZIP	WELLINGTON, FL. 33414	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: *Susan Kingston* DATE 2/15/01 DAYTIME PHONE # (561) 798-6300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)