2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED May 01, 2002 8:00 am secretary of State DOCUMENT # P01000002392 1. Entity Name 05-01-2002 91496 035 ***150 00 MARTIN & MARTIN DISTRIBUTING, INC. Principal Place of Business Mailing Address 880 TIMBER POND DRIVE 880 TIMBER POND DRIVE BRANDON FL 33510 **BRANDON FL 33510** 2. Principal Place of Business 880 Timber Band Drive 880 Timber DO NOT WRITE IN THIS SPACE City & State Applied For Grandon Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable), 3242 Henderson Blug FLAWS, LAWRENCE 101 E. KENNEDY BLVD. #2550 **TAMPA FL 33602** Zip Code 38609 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 LAWTENCE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS D, President TITLE Delete martin, Shery/ L. 880 Timber Rand Drive NAME MARTIN, SHERYL L NAME 880 TIMBER POND DRIVE STREET ADDRESS STREET ADDRESS Brandon, FL 33510 D. V.P., Sec. / Treasurer CITY-ST-ZIP **BRANDON FL 33510** CITY-ST-ZIP Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.