

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2002 8:00 am
Secretary of State

05-10-2002 90009 021 ***150.00

DOCUMENT # P01000006663

1. Entity Name
MARINELLI CONSTRUCTION, INC.

Principal Place of Business Mailing Address
~~800 SE 3RD AVENUE~~ ~~800 SE 3RD AVENUE~~
~~SUITE 301~~ ~~SUITE 301~~
~~FT. LAUDERDALE FL 33316~~ ~~FT. LAUDERDALE FL 33316~~

2. Principal Place of Business 3. Mailing Address
~~1319 SE 3rd Terr~~ ~~1319 SE 3rd Terr~~
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State Deerfield Bch Deerfield Bch
 Zip FL Country 33441 Zip FL Country 33441

4. FEI Number 65-1143009 Applied For
 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
LABATE, MARK J
~~800 SE 3RD AVENUE~~
~~SUITE 301~~
~~FT. LAUDERDALE FL 33316~~

7. Name and Address of New Registered Agent
 Name **LABATE, Mark J.**
 Street Address (P.O. Box Number is Not Acceptable) **100 E. Sample Road**
 Suite **100**
 City **Pompano Bch FL** Zip Code **33064**

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 DATE **4/29/02**
Signature, typed or printed name of registered agent and title if applicable. (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, 2002 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

TITLE NAME	D MARINELLI, FRANCO	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	800 SE 3RD AVENUE SUITE 301	
CITY-ST-ZIP	FT. LAUDERDALE FL 33316	
TITLE NAME	D MARINELLI, VITTORIO	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	800 SE 3RD AVENUE SUITE 301	
CITY-ST-ZIP	FT. LAUDERDALE FL 33316	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	D, VP MARINELLI, Franco	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1319 SE 3rd Terr	
CITY-ST-ZIP	Deerfield Bch, FL 33441	
TITLE NAME	D, VP MARINELLI, Vittorio	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1319 SE 3rd Terr	
CITY-ST-ZIP	Deerfield Bch, FL 33441	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 files empowered.

SIGNATURE: DATE **4/29/02**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)