

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2002 8:00 am
Secretary of State
 01-31-2002 90011 023 ***150.00

0187871 AV

DOCUMENT # P01000017901

1. Entity Name
MARSHAY, INC.

Principal Place of Business
5137 HERON PLACE
COCONUT CREEK FL 33073

Mailing Address
5137 HERON PLACE
COCONUT CREEK FL 33073

2. Principal Place of Business
8000 Wiles Rd.
 Suite, Apt. #, etc.

3. Mailing Address
SAME.
 Suite, Apt. #, etc.

City & State
Coral Springs, FLA.
 Zip
33067
 Country
BROWARD

City & State
 Zip
 Country

4. FEI Number ☒ 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

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE FL 33311-4132

7. Name and Address of New Registered Agent

Name
Lawrence D. Felder Esq. P.A.
 Street Address (P.O. Box Number is Not Acceptable)
1840 S.E. 1st AVE.
 City
FT. LAUDERDALE **FL** Zip Code
33316

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 **Lawrence D. Felder Esq.**
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/11/02
 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
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. MARKOW, JEFFREY** ☐ Delete
 STREET ADDRESS **5137 HERON PLACE**
 CITY-ST-ZIP **COCONUT CREEK FL 33073**

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME **D. MARKOW, JEFFREY** ☐ Change ☐ Addition
 STREET ADDRESS **8000 Wiles Road.**
 CITY-ST-ZIP **Coral Springs, FLORIDA. 33067.**

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
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 NAME ☐ Change ☐ 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 like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/02 (954) 345-1177

Date

Daytime Phone #

CR2E034 19/011