

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

03-29-2002 90830 039 ***150.00

0261348 AV

DOCUMENT # P01000029508

1. Entity Name
MARTEX NUTRITION, INC.

Principal Place of Business
P O BOX 936064
POMPANO BEACH FL 33093

Mailing Address
P O BOX 936064
POMPANO BEACH FL 33093



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7205 NW 68 street
 Suite, Apt. #, etc.
Suite 14

3. Mailing Address
7205 NW 68 street
 Suite, Apt. #, etc.
Suite 14

City & State
Miami, Florida
 Zip
33166
 Country
USA

City & State
Miami, Florida
 Zip
33166
 Country
USA

4. FEI Number
65-1089046

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

LEVINE & SEGAUL PA
4300 N UNIVERSITY DR ST A-106
FT LAUDERDALE FL 33351

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

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
 STREET ADDRESS
 CITY-ST-ZIP
P TEISEIRA, TEODORO
P O BOX 936064
POMPANO BEACH FL 33093 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VST MARTINEZ, LILIANA
P O BOX 936064
POMPANO BEACH FL 33093 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
President Teixeira, Teodoro
7205 NW 68 St, Suite 14
Miami, FL 33166 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
Vice President Martinez, Liliana
7205 NW 68 St, Suite
Miami, FL 33166 ☒ Change ☐ Addition

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

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

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

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

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:

Teodoro M. Teixeira
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/02
 Date

305-863-3300
 Daytime Phone #

CR2E034 (9/01)