

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90263 001 ***150.00
 03-07-2002 90263 002 *****8.75

DOCUMENT # P01000041598

1. Entity Name
TALBOT SERVICE MARKETING, INC.

Principal Place of Business
2110 NORTH ANDREWS AVE.
POMPANO BEACH FL 33069

Mailing Address
2110 NORTH ANDREWS AVE.
POMPANO BEACH FL 33069

2. Principal Place of Business
404 NW 44th Terr. #102

3. Mailing Address
404 NW 44th Terr. #102

Suite, Apt. #, etc.
Deerfield Beach

Suite, Apt. #, etc.
Deerfield Beach

City & State
Florida

City & State
Florida

4. FEI Number
65-1113886

Applied For
Not Applicable

Zip
33442

Country
U.S.A

Zip
33442

Country
U.S.A

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

6. Name and Address of Current Registered Agent

TALBOT, VALERIE
2110 NORTH ANDREWS AVE.
POMPANO BEACH FL 33069

7. Name and Address of New Registered Agent

Name **TALBOT, VALERIE**
Street Address (P.O. Box Number is Not Acceptable)
404 NW 44th Terr. #102
Deerfield Beach
City **FL** **Zip Code** **33442**

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 *Valerie Talbot* **VALERIE TALBOT, VICE-President** **02/18/02**
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 **PD** ☐ **Delete**
NAME **TALBOT, ANDRE**
STREET ADDRESS **197 DE LA STATION, LAURIER-STATION, QC**
CITY-ST-ZIP **CANADA GOS 1N0**

TITLE **SD** ☐ **Delete**
NAME **TALBOT, VALERIE**
STREET ADDRESS **197 DE LA STATION, LAURIER-STATION, QC**
CITY-ST-ZIP **CANADA GOS 1N0**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ **Change** ☐ **Addition**
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TITLE ☐ **Change** ☐ **Addition**
NAME
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: *Valerie Talbot* **VALERIE TALBOT** **02/18/02** **(954) 415-4059**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)