

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 30, 2002 8:00 am
Secretary of State

04-18-2002 90470 040 ***150.00

DOCUMENT # P01000041689

1. Entity Name

ON-SITE MARKETING & PROMOTIONS INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1802 N. UNIVERSITY DRIVE

Suite, Apt. #, etc.

100A

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

PLANTATION

FL 33322

Country

USA

Zip

Country

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name EIRA TAYLOR

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

1802 N. UNIVERSITY DRIVE

SUITE 100A

City

PLANTATION

FL

Zip Code

33322

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 re-registering)

DATE

9. This Corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

January 1 to May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 DIRECTOR
NAME EIRA TAYLOR
STREET ADDRESS 1802 UNIVERSITY DR. 100A
CITY - ST - ZIP PLANTATION FL 33322

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, will call, or like authority.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EIRA TAYLOR 03-28-02 (954) 424 6071

Date

Daytime Phone #