

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

FILED
Jun 13, 2002 8:00 am
Secretary of State

06-13-2002 90386 036 ***558.75

DOCUMENT # PO1000059876
1. Entity Name

MARQUIS FINANCIAL Group, Inc. (P)

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4301 W. Arch Street
Suite, Apt. #, etc.

3. Mailing Address
4301 W. Arch Street
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Tampa, FLA.
Zip
33607
Country
USA

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Tampa, FLA.
Zip
33607
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4. FEI Number
59-3723632

Applied For
☐ Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Bruce D. HENRY

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

4301 Arch Street

City Tampa FL Zip Code 33607

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 BRUCE D. HENRY
Signature, typed or printed name of registered agent and fee, if applicable.

(NOT: 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)

January 1 - 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 P
NAME TASHA L. Hill
STREET ADDRESS 4301 W. Arch Street, Tpa. Fla.
CITY-ST-ZIP 33607

TITLE X
NAME Ada B. Hill
STREET ADDRESS 4301 Arch Street, Tpa. Fla.
CITY-ST-ZIP 33607

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
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)(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 on an attachment with an address, with all other like empowered.

SIGNATURE: TASHA L. HILL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/11/02 813.293.9705

Date

Daytime Phone #

CR2E034B (12/01)