

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2002 8:00 am
Secretary of State

07-08-2002 90231 041 ***150.00

DOCUMENT # P01000063195

1. Entity Name
MARKS SALES INC.

Principal Place of Business
9549 N BELFORT CIRCLE
TAMARAC FL 33321

Mailing Address
9549 N BELFORT CIRCLE
TAMARAC FL 33321

39503



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FRI Number

65-1116216

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SILVERMAN, MARK
9549 N BELFORT CIRCLE
TAMARAC FL 33321

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. **PRESIDENT** OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **MARK SILVERMAN** ☐ Delete
NAME
STREET ADDRESS **9549 N. BELFORT CIRCLE**
CITY-ST-ZIP **TAMARAC, FL. 33321**

Change

Addition

TITLE **VICE PRESIDENT** ☒ Delete
NAME
STREET ADDRESS **9549 N. BELFORT CIRCLE**
CITY-ST-ZIP **TAMARAC, FL. 33321**

Change

Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE ☐ Delete
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)(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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mark Silverman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/3/2002 954-728-6317
Date Daytime Phone #

CR2E034 (4/02)

Attached
From The Desk Of

Mark Silverman

7010006395

July 3, 2002

39503

To Whom it may Concern -

Enclosed is a check for \$150.00 for the
UBR. I spoke to Scott B in your
Office and I explained to him
that this is the first notice I
received from your Department - I
would have never been late on
documents this important. Therefore,
I should not be penalized for a late
filing - I hope you understand this -
If there is any question or information
you might need, please call me
at 954-726-6317 -

Thanking you in advance for your help -

Sincerely -

Mark Silverman