

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

**FILED**  
**Apr 22, 2002 8:00 am**  
**Secretary of State**

04-22-2002 90141 030 \*\*\*150.00

DOCUMENT # P 01000079221

1. Entity Name

FUNCTIONS BY MARTY, INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

111 S Holly Brook Dr

3. Mailing Address

111 S. Holly Brook Dr

Suite, Apt. #, etc.

Bldg 44 Unit 102

Suite, Apt. #, etc.

Bldg 44 Unit 102

City & State

Pembroke Pines, FL

City & State

Pembroke Pines, FL

Zip

33025

Country

USA

Zip

33025

Country

USA

4. FEI Number

05-1126588

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name

Lawrence E. Martin Jr.

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

111 S. Holly Brook Dr. Bldg 44 Apt 102

City

Pembroke Pines

FL

Zip Code

33025

**DO NOT WRITE  
IN THIS SPACE**

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

Lawrence E. Martin Jr.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/10/02

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 \$81.25  
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.T.D.  
NAME Lawrence E. Martin Jr.  
STREET ADDRESS 111 S. Holly Brook Dr. Bldg 44 #102  
CITY-ST-ZIP Pembroke Pines, FL 33025

TITLE VP, S.D.  
NAME Gail B. Martin  
STREET ADDRESS 111 S. Holly Brook Dr. Bldg 44 #102  
CITY-ST-ZIP Pembroke Pines, FL 33025

TITLE  
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CITY-ST-ZIP

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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)(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 a power like empowered.

SIGNATURE:

Lawrence E. Martin Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/02

Date

954-815-5630

Daytime Phone

CR2E034B (12/01)