

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90322 005 ***150.00

DOCUMENT # P01000080468

1. Entity Name
MARK LEPOWSKY, INC.

Principal Place of Business
 1216 W. FLETCHER AVENUE
 TAMPA FL 33612

Mailing Address
 1216 W. FLETCHER AVENUE
 TAMPA FL 33612

2. Principal Place of Business
1010-E. Busch Blvd.
 Suite, Apt. #, etc.
108

3. Mailing Address
1010 E. Busch Blvd.
 Suite, Apt. #, etc.
108

City & State
Tampa, FL.
 Zip
33612
 Country
Hillsborough

City & State
Tampa, FL.
 Zip
33612
 Country
Hillsborough

4. FEI Number
59-373 7984

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

LEPOWSKY, MARK
 1216 W. FLETCHER AVENUE
 TAMPA FL 33612

Name
MARK Lepowsky
 Street Address (P.O. Box Number is Not Acceptable)
5541-15th AVE. N.
 City
St. Pete FL Zip Code
33710

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 **Mark Lepowsky**
 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. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEPOWSKY, MARK 1216 W. FLETCHER AVENUE TAMPA FL 33612	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **Mark Lepowsky**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-16-02 813-933-1260

CR2E034 (4/02)

Attachment PO1000080468

122396

Full Effect

Commercial Furniture Restoration

To those concerned;

I was advised to write this note concerning my receipt of the UNIFORM BUSINESS REPORT. It appears that you have the old address of 1216-W. Fletcher, and we are located at 1010-E. Busch Blvd. #108, Tampa, Fl. 33612, since October of 01. This copy is the first I have received. Thanks for the help.

Mark Lepowsky Pres.

