

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

0344191 AV

DOCUMENT # P01000094782

1. Entity Name
OPTIONS CONSULTING AND PROCUREMENT, INC.



05-05-2003 90316 026 ***150.00

Principal Place of Business
6491 SUNSET STRIP
SUITE 7
SUNRISE FL 33313

Mailing Address
6491 SUNSET STRIP
SUITE 7
SUNRISE FL 33313



2. Principal Place of Business

6491 Sunset Strip.

Suite, Apt. #, etc.

Suite #7

City & State

Sunrise FL.

Zip
33313

Country

USA

3. Mailing Address

6491 Sunset Strip.

Suite, Apt. #, etc.

Suite #7

City & State

Sunrise FL.

Zip
33313

Country

USA

☐ CHECK HERE IF MAKING CHANGES.

4. FEI Number 65-1141760

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SWINNEY, MARCUS T
6491 SUNSET STRIP
SUITE #7
SUNRISE FL 33313

7. Name and Address of New Registered Agent

Name
MARCUS T. Swinney

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

6491 Sunset Strip #7

City
Sunrise

FL

Zip Code

33313

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 MARCUS T. Swinney

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

(NOTE: Registered Agent signature required when reinstating)

4-29-2003

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PSTD
NAME SWINNEY, MARCUS
STREET ADDRESS 6491 SUNSET STRIP - SUITE 7
CITY-ST-ZIP SUNRISE FL 33313 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD
NAME SWINNEY, MARCUS T.
STREET ADDRESS 6491 Sunset Strip #7
CITY-ST-ZIP SUNRISE, FL. 33313 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MARCUS T. Swinney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-2003

Date

Daytime Phone #

954-815

5906

CR2E034 (10/02)