

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 16, 2003 8:00 am**  
**Secretary of State**

04-16-2003 90248 043 \*\*\*150.00

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**DOCUMENT # P01000109449**

1. Entity Name  
**AN OCCASIONAL PIECE, INC.**



Principal Place of Business  
**5540 PGA BLVD #104  
PALM GARDENS FL 33418**

Mailing Address  
**5540 PGA BLVD #104  
PALM GARDENS FL 33418**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **02-0531104**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

**FILINGS, INC.  
3732 N.W. 16TH STREET  
FT. LAUDERDALE FL 33311-4132**

Name  
**ALLEN DAVID MARCUS**  
Street Address (P.O. Box Number is Not Acceptable)  
**849 UNIVERSITY BLVD.  
SUITE 108**  
City **JUPITER** FL Zip Code **33458**

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

(NOTE: Registered Agent signature required when reinstating)

4/14/03  
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **MARCIS, ALLEN D**  
CITY-ST-ZIP **1200 TOWN CENTER DR #330  
JUPITER FL 33458**

TITLE ☒ Change ☐ Addition  
NAME **MARCUS, ALLEN D.**  
STREET ADDRESS **849 UNIVERSITY BLVD #108**  
CITY-ST-ZIP **JUPITER, FL. 33458**

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **PYLE, LAWRENCE**  
CITY-ST-ZIP **1200 TOWN CENTER DR #330  
JUPITER FL 33458**

TITLE ☒ Change ☐ Addition  
NAME **PYLE, LAWRENCE**  
STREET ADDRESS **849 UNIVERSITY BLVD. #108**  
CITY-ST-ZIP **JUPITER, FL. 33458**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/03 561-622-6620  
Date Daytime Phone #

CR2E034 (10/02)