

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

04-03-2003 90147 004 ***158.75
P02000001219

FILED
03 MAY -1 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000001219

1. Entity Name
NETWORK MARKETING CORP.



Principal Place of Business
10000 NW 80 CT BUILDING 2 SUITE 2136
HIALEAH GARDENS FL 33016

Mailing Address
10000 NW 80 CT BUILDING 2 SUITE 2136
HIALEAH GARDENS FL 33016

2. Principal Place of Business
1756 S.W. 8th ST
Suite, Apt. #, etc. 205

3. Mailing Address
SAME
Suite, Apt. #, etc.

City & State
MIAMI FL

City & State

Zip
33135

Country
DADE

Zip

Country

4. FEI Number
216-0000242

Applied For
Not Applicable

5. Certificate of Status Desired
\$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
AMAYA, RUDOLF R
10000 NW 80 CT BUILDING 2 SUITE 2136
HIALEAH GARDENS FL 33016
Blq 2 ST 2136
Hialeah Gardens Fl 33016

7. Name and Address of New Registered Agent
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

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	PD	☒ Delete
NAME	AMAYA, RUDOLF R	
STREET ADDRESS	10000 NW 80 CT BUILDING 2 SUITE 2136	
CITY-ST-ZIP	HIALEAH GARDENS FL 33016	
TITLE	VD	☒ Delete
NAME	AMAYA, RODOLFO C	
STREET ADDRESS	10000 NW 80 CT BUILDING 2 SUITE 2136	
CITY-ST-ZIP	HIALEAH GARDENS FL 33016	
TITLE	AMAYA Rodolfo C	☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	☐ Change ☒ Addition
NAME	ARNOLDO J. HERRERA	
STREET ADDRESS	16540 SW 99th ST	
CITY-ST-ZIP	MIAMI FL 33196	
TITLE	VD	☐ Change ☒ Addition
NAME	AMAYA RUDOLF R	
STREET ADDRESS	10000 NW 80 CT Blq 2 Ste 2136	
CITY-ST-ZIP	HIALEAH GARDENS FL 33016	
TITLE	Secretary	☐ Change ☒ Addition
NAME	AMAYA Rodolfo C	
STREET ADDRESS	10000 NW 80 CT Blq 2 Ste 2136	
CITY-ST-ZIP	Hialeah Gardens FL 33016	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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 REQUIRED**

SIGNATURE AND OFFICE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)