

**FILED**  
**Jun 03, 2003 8:00 am**  
**Secretary of State**

06-03-2003 90040 014 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # P02000062487**

1. Entity Name  
**MARKETWAYS CONSULTING INC.**



Principal Place of Business  
**20533 BISCAYNE BLVD. #1306  
AVENTURA, FL 33180**

Mailing Address  
**20533 BISCAYNE BLVD. #1306  
AVENTURA, FL 33180**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

**75-3063419**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**JUNE, BRADLEY  
1000 BRICKELL AVENUE #1040  
MAIMI, FL 33131**

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 resigning)

DATE

**FILE NOW!! - FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$560.00**  
**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 **D** ☐ Delete  
NAME **ARNETTE, CECIL**  
STREET ADDRESS **20533 BISCAYNE BLVD. #1306**  
CITY-ST-ZIP **AVENTURA, FL 33180**

TITLE ☐ 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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
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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:**

*Cecil Arnette* **CECIL ARNETTE**

**5-30-03**

**305-373-3933**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

Attachment  
80124123

May 30, 2003

Florida Department of State  
Division of Corporations  
P.O. BOX 6327  
Tallahassee, Florida 32314

RE: ~~Corporation~~ Annual Report  
P02000062487  
MARKETWAYS CONSULTING INC.

VIA OVERNIGHT EXPRESS MAIL  
ET 122474181US

Dear Sir/Madam:

Please accept the enclosed filing of the Uniform Business Report Form for the above corporation as a timely report.

We were waiting for the report forms to arrive by mail but we never received them.

We talked to one of your representatives this morning and were advised to download the form from the internet and to send the paperwork with the regular filing fee and that it would be accepted because of the UBR forms never having been mailed.

Enclosed please find the form and the check for filing renewal in the amount of \$150.00

We thank you for your assistance.



C. Arnette  
for  
Marketways Consulting Inc.  
305-373-3933