

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000074792

1. Entity Name
R & B MARATHON BICYCLE, INC.



FILED
Aug 07, 2003 8:00 am
Secretary of State

08-07-2003 90116 019 ***150.00

0096655
AV

Principal Place of Business
7515 46TH AVENUE NORTH
ST. PETERSBURG FL 33709

Mailing Address
7515 46TH AVENUE NORTH
ST. PETERSBURG FL 33709



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-3699896

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

7. Name and Address of New Registered Agent

SELBIE, ROBERT
2109 DUNCAN DRIVE
BELLEAIR BLUFFS FL 33770

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 \$550.00

After September 10, 2003 Fee will be \$750.00

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 NAME STREET ADDRESS CITY-ST-ZIP	P LASHUA, RAYMOND 14510 APACHE AVENUE LARGO FL 33774	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SELBIE, ROBERT 2109 DUNCAN DRIVE BELLEAIR BLUFFS FL 33770	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 *Robert Selbie* **RED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/31/03

Date

727-547-9884

Daytime Phone #

CR2E034 (4/03)

Attachment

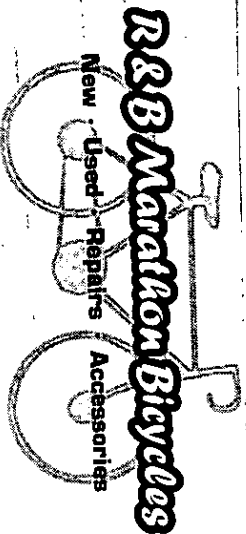
80136614
#P02000074792

To whom it may concern,

We never received prior notification concerning this bill. Your help and understanding in this matter would be greatly appreciated.

Thank you!

Robert Jellie



7515 46th Avenue N.
St. Petersburg, FL 33709 Phone (727) 547-9884