

FILED
Jun 16, 2003 8:00 am
Secretary of State

06-05-2003 90126 028 ***150.00

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

DOCUMENT # **P02000116034**

MARKETING STUDIO, INC.

Principal Place of Business
1201 BRICKELL AVENUE, SUITE #630
MIAMI FL 33131

Mailing Address
1201 BRICKELL AVENUE, SUITE #630
MIAMI FL 33131

55048640

2: Principal Place of Business		3: Mailing Address	
State, Apt. #, etc.		State, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4: FEI Number		☒ Applied For ☐ Not Applicable	
5: Certificate of Status Desired		☐ \$8.75 Additional Fee Required	

☒ CHECK HERE IF MAKING CHANGE

6: Name and Address of Current Registered Agent		7: Name and Address of New Registered Agent	
ORTEGA, LUZ 1201 BRICKELL AVENUE, SUITE #630 MIAMI FL 33131		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: _____ DATE: _____
Signature must be printed name of registered agent and state I accept role. (NOTE: Registered Agent's signature required when registered.)

FILE NOW!!! FEE IS \$160.00 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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	

12. I hereby certify that the information provided on this statement was true and correct as of the date of filing. I understand that the Secretary of State may require additional information or documents to complete the filing process. I agree to provide such information or documents as requested. I understand that the Secretary of State may require additional information or documents to complete the filing process. I agree to provide such information or documents as requested.

Luiz E. Ortega

Attachment

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000116034

1. Entity Name
MARKETING STUDIO, INC.

Principal Place of Business
1201 BRICKELL AVENUE, SUITE #630
MIAMI FL 33131

MAILING ADDRESS
1201 BRICKELL AVENUE, SUITE #630
MIAMI FL 33131

55048640

2. Principal Place of Business

3. Mailing Address

State, Apt. #, etc.

State, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number

☒ 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

ORTEGA, LUZ
1201 BRICKELL AVENUE, SUITE #630
MIAMI FL 33131

Name

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

City

FL

Zip Code

8. The above named entity is signing 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 obligation of registered agent.

9. SIGNATURE

Signature (typed in a red name of registered agent or officer is acceptable)

NOTE: Registered Agent's name required when changing

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

10. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11-11

10-1 NAME D ORTEGA, LUZ STREET ADDRESS 1201 BRICKELL AVENUE, SUITE #630 CITY, ST, ZIP MIAMI FL 33131	☐ Delete
10-2 NAME STREET ADDRESS CITY, ST, ZIP	☐ Delete
10-3 NAME STREET ADDRESS CITY, ST, ZIP	☐ Delete
10-4 NAME STREET ADDRESS CITY, ST, ZIP	☐ Delete
10-5 NAME STREET ADDRESS CITY, ST, ZIP	☐ Delete
10-6 NAME STREET ADDRESS CITY, ST, ZIP	☐ Delete

11-1 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
11-2 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
11-3 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
11-4 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
11-5 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition
11-6 NAME STREET ADDRESS CITY, ST, ZIP	☐ Change ☐ Addition

12. I hereby certify that the information furnished above is true and correct to the best of my knowledge and belief, and that I am familiar with the information furnished and the obligations of the registered agent or officer. I am familiar with the information furnished and the obligations of the registered agent or officer. I am familiar with the information furnished and the obligations of the registered agent or officer.

Luz E. Ortega A.