

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 13, 2003 8:00 am**  
**Secretary of State**

01-13-2003 90128 037 \*\*\*158.75

**DOCUMENT # P27531**

1. Entity Name

**MARTHA FROMM ENTERPRISES, INC.**



Principal Place of Business

**1505 20TH ST.  
VERO BEACH FL 32960  
US**

Mailing Address

**1505 20TH ST.  
VERO BEACH FL 32960  
US**

**20005264**



2. Principal Place of Business

**1505 20TH ST.**

3. Mailing Address

**SAME**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

**VERO BEACH, FL.**

City & State

4. FEI Number

**39-1581792**

Applied For

Not Applicable

Zip

Country

**32960**

**U.S.A.**

Zip

Country

5. Certificate of Status Desired



**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**FROMM, MARTHA E.  
1505 20TH ST.  
VERO BEACH FL 32960**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: **PD**  Delete  
NAME: **FROMM, MARTHA E.**  
STREET ADDRESS: **409 MAIN STREET**  
CITY-ST-ZIP: **EAU CLAIRE WI**

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

TITLE: **VC**  Delete  
NAME: **ZASH, ANTHONY III**  
STREET ADDRESS: **1505 20TH STREET**  
CITY-ST-ZIP: **VERO BEACH FL 32960**

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

TITLE:  Delete  
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STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Anthony Zash, III*  
**Anthony Zash, III**

Date

**1/7/2003**

Daytime Phone #

**772/567-3471**

CR2E034 (10/02)