

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90037 029 ***150.00

DOCUMENT # **P93000020235**

1. Entity Name
GARI MARKETING, INC.

Principal Place of Business
% REBECCA YORE
645 NE 173RD TER
NORTH MIAMI BEACH FL 33162

Mailing Address
% REBECCA YORE
645 NE 173RD TER
NORTH MIAMI BEACH FL 33162



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3640 YACHT CLUB DR.

3. Mailing Address
3640 YACHT CLUB DR.

Suite, Apt. #, etc.
1504

Suite, Apt. #, etc.
1504

City & State
AVENTURA, FL.

City & State
AVENTURA, FL.

4. FEI Number
65-0400948

Applied For
Not Applicable

Zip
33180

Country
MIAMI-DADE

Zip
33180

Country
MIAMI-DADE

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

PERLOW, JEFFREY M
1820 E HALLANDALE BEACH BLVD
HALLANDALE FL 33009

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DE ROSENBLATT, CELIA		NAME		
STREET ADDRESS	645 NE 173RD TER		STREET ADDRESS	3640 YACHT CLUB DR. #1504	
CITY-ST-ZIP	N MIAMI BEACH FL		CITY-ST-ZIP	AVENTURA, FL. 33180	
TITLE	VPT	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROSENBLATT, SALO		NAME		
STREET ADDRESS	645 NE 173RD TER		STREET ADDRESS	3640 YACHT CLUB DR. #1504	
CITY-ST-ZIP	N MIAMI BEACH FL		CITY-ST-ZIP	AVENTURA, FL. 33180	
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROSENBLATT, TANIA		NAME		
STREET ADDRESS	645 NE 173RD TER		STREET ADDRESS	3640 YACHT CLUB DR. #1504	
CITY-ST-ZIP	N MIAMI BEACH FL		CITY-ST-ZIP	AVENTURA, FL. 33180	
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROSENBLATT, ESTELA		NAME		
STREET ADDRESS	645 NE 173RD TER		STREET ADDRESS	3640 YACHT CLUB DR. #1504	
CITY-ST-ZIP	N MIAMI BEACH FL		CITY-ST-ZIP	AVENTURA, FL. 33180	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Celia de Rosenblatt**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-2002

Date

Daytime Phone #

CR2E034 (9/01)