

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

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90178 038 ***150.00

DOCUMENT # **P93000047792**
SUNCOAST MARKETING CONSULTANTS,
7301 SUGARBUSH DR
SPRING HILL FL 34606 **INC**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7301 SUGARBUSH DR
Suite, Apt. #, etc.

3. Mailing Address
7301 SUGARBUSH DR
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
SPRING HILL, FL
Zip
34606 Country
U.S.A.

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SPRING HILL FL
Zip
34606 Country
U.S.A.

4. FEI Number
59-3192607
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name
HARVEY W. HEIMANN
Street Address (P.O. Box Number is Not Acceptable)
7301 SUGARBUSH DR.
City
SPRING HILL FL
Zip
34606

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 Harvey W. Heimann March 7, 2003
Signature, printed or printed name of registered agent and fee 4 applicable. (NOTE: Registered Agent signature required when registering.)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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	S	TITLE	
NAME	HEIMANN, HARVEY W	NAME	
STREET ADDRESS	7301 SUGARBUSH DR.	STREET ADDRESS	
CITY-STATE-ZIP	SPRING HILL FL 34606	CITY-STATE-ZIP	
TITLE	P	TITLE	
NAME	HEIMANN, JEAN M.	NAME	
STREET ADDRESS	7301 SUGARBUSH DR	STREET ADDRESS	
CITY-STATE-ZIP	SPRING HILL FL 34606	CITY-STATE-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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STREET ADDRESS		STREET ADDRESS	
CITY-STATE-ZIP		CITY-STATE-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Harvey W. Heimann March 7, 2003 727-480-1465
SIGNATURE AND PRINTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR200343 (12/02)