


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

FILED

03 DEC -8 AM 8:51

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # <b>P93000063547</b> 1. Entity Name <b>ACME TSHIRT COMPANY, INC.</b>	
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**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>961 SW 122 AV</b> Suite, Apt. #, etc.	3. Mailing Address <b>961- SW 122 AV</b> Suite, Apt. #, etc.
City & State <b>MIAMI, FL.</b>	City & State <b>MIAMI, FL.</b>
Zip <b>33184</b>	Country <b>US</b>

**REINSTATEMENT**

4. FEI Number <b>65-0438899</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name <b>BEATRIZ CADOTZ</b>	
Street Address (P.O. Box Number is Not Acceptable) <b>1110 BRICKELL AV 7th Floor</b>	
City <b>MIAMI</b>	FL Zip Code <b>33131</b>

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

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 <b>P</b> NAME <b>JERRY MARZULLO</b> STREET ADDRESS <b>8290 SW 90th ST.</b> CITY-ST-ZIP <b>MIAMI, FL. 33156</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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**200025327922**  
12/08/03--01068--017 \*\*150.00

**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(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 on an attachment with an address, with all other like empowered.

SIGNATURE:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**12.4.03** (305)223-2005  
Date Daytime Phone #

CR2E034B (12/02)

961 SW 122 Avenue • Miami, FL 33184



(305) 223-2005 Phone • (305) 222-8170

jerry@acmetshirt.com

December 4, 2003

To Whom It May Concern,

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Acme T shirt Company moved and I also changed my residence. The new and correct information is on the enclosed form that I downloaded. I called up the Secretary of State office and was told to pay the \$150.00 and to notify you of the reason.

Sincerely Yours,

A handwritten signature in black ink, appearing to read "Jerry Marzullo". The signature is stylized with a large, looping initial "J" and a trailing flourish.

Jerry Marzullo  
President, Acme T Shirt Company Inc.  
(305)223-2005