

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000049262

1. Entity Name

MARJO INVESTMENTS, INC.

FILED

May 12, 2000 8:00 am  
Secretary of State

05-12-2000 90035 017 \*\*\*150.00

Principal Place of Business

14950 GULF BLVD.  
APT. 601  
MADEIRA BEACH FL 33708

Mailing Address

10111 TARPON DRIVE  
ST PETERSBURG FL 33706-3122  
US

2. Principal Place of Business

7037 Sunset DR. S. # 703

3. Mailing Address

7037 Sunset DR. S. # 703

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

S. Pasadena, FL

City & State

S. Pasadena, FL

4. FEI Number

59-3255379

Applied For

Not Applicable

Zip

33703

Country

U.S.A.

Zip

33707

Country

U.S.A.

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

MAUER, JOSEPH P  
10111 TARPON DRIVE  
ST PETERSBURG FL 33706

Name

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

7037 Sunset DR. S. # 703

City

S. Pasadena

FL

Zip Code

33707

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

Signature typed or printed name of registered agent and title if applicable.

(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, 2000 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          | PD                     | <input type="checkbox"/> Delete |
| NAME           | MAUER, MARGARET        |                                 |
| STREET ADDRESS | 10111 TARPON DRIVE     |                                 |
| CITY-ST-ZIP    | ST PETERSBURG FL 33706 |                                 |
| TITLE          |                        | <input type="checkbox"/> Delete |
| NAME           |                        |                                 |
| STREET ADDRESS |                        |                                 |
| CITY-ST-ZIP    |                        |                                 |
| TITLE          |                        | <input type="checkbox"/> Delete |
| NAME           |                        |                                 |
| STREET ADDRESS |                        |                                 |
| CITY-ST-ZIP    |                        |                                 |
| TITLE          |                        | <input type="checkbox"/> Delete |
| NAME           |                        |                                 |
| STREET ADDRESS |                        |                                 |
| CITY-ST-ZIP    |                        |                                 |
| TITLE          |                        | <input type="checkbox"/> Delete |
| NAME           |                        |                                 |
| STREET ADDRESS |                        |                                 |
| CITY-ST-ZIP    |                        |                                 |

|                |  |
|----------------|--|
| TITLE          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |  |
| STREET ADDRESS | 7037 Sunset DR. S. # 703   |
| CITY-ST-ZIP    | S. Pasadena, FL 33707  |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |  |
| STREET ADDRESS |  |
| 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)