## FILED Jul 02, 2002 8:00 am Secretary of State

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1. Entity Name  MARKUS MUELLER PRODUCTIONS, INC.					07-02-2002 90810 014 ***150.00			
Principal Place of Business 2120 LUCERNE AVE MIAMI BEACH FL 33140 US		Mailing Address 2120 LUCERNE AVE MIAMI BEACH FL 33140 US				Ist Burks drows think short d	III AIDE PRVI	
2 Principal F	Place of Business	3. Mailing Address						
Suite, Apt.		Suite, Apt. #, etc.			DO NOT WRITE I			
	0.7.40	, i					polied For	
City & Stat	ie	City & State		4.	65-0564189	No.	t Applicable	
Zip	Country	Zip	Country	5.	Certificate of Status Desired	☐ \$8.75 Add Fee Require		
	6. Name and Address of Current F	Registered Agent			Name and Address of New Regi	stered Agent		
LANGSTADT, OLIVER J 815 PONCE DE LEON BLVD CORAL GABLES FL-39134			Mar Street A	Name				
-CUHAL G	ADLES PL-33134		City	Miami	Beach	FL Zip Code	33140	
8. The above	e named entity submits this statement for	the purpose of changing its reg	gistered office or	registered a		a.	٠.	
SIGNATÙRE	Signature, typed or printed name of registered agent al	nd title if applicable. (NOTE: Re	egistered Agent signati	ure required when		21/02 DATE	<del>-,</del> ·	
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!!  After May 1, 2002  Make Check Payable	FEE IS \$150.	00 50.00	10. Election Campaign Financ Trust Fund Contribution.	~	<b>0</b> May Be I to Fees	
11.	OFFICERS AND D	DIRECTORS	12.	Α	DDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MUELLER, MARKUSK – 2120 LUCERNE AVÉ MIAMI BCH FL 33140	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Muelle	er, <u>Mar</u> kus	<b>⊠</b> Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	INDUM BOTTE SOTTO	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
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TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			Change	Addition	

13. I hereby certify that the information supplied with this filling 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 accurage 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\*\*

SIGNATURE\*\*

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2002 UNIFORM BUSINESS REPORT (UBR)

P94000058744

**DOCUMENT #** 

MacKendree et Company, P.A.

CERTIFIED PUBLIC ACCOUNT

RONALD O. MacKENDREE, C.P.A. JAIME MAYA, C.P.A.

6701 SUNSET DRIVE SUITE #101 MIAMI, FLORIDA 33143 (305) 666-9613 (305) 669-9613 (FAX)

June 27, 2002

Division of Corporations **Uniform Business Report Filings** P.O. Box #1500 Tallahassee, Florida 32302-1500

Markus Mueller Productions, Inc. Document #P94000058744 Form UBR for 2002

Dear Sirs:

We are enclosing the taxpayer's check in the amount of \$150 for the year 2002. They have asked that we explain the circumstances for their late filing and your consideration in waiving the penalty.

STO I TO WAS THE SECTION During the year 2001 and 2002, the corporation experienced a serious downturn in business: As a result, the owner has been out of the country for over a year and is currently still out of the country. The corporation has part-time help that handles office matters. They just noticed that the Uniform Business Report had not yet been filed. We immediately sent the forms via Express mail to the owner for his signature and Express mail back.

Thank you for your attention and consideration.

Sincerely,

Jaime Mava

Certified Public Accountant

Enclosures

Xc: Markus Mueller Productions, Inc.

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