

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 30, 2002 8:00 am**  
**Secretary of State**

07-30-2002 90384 022 \*\*\*550.00

**DOCUMENT # P94000063668**

1. Entity Name  
**IN THE MARKET, INC.**

Principal Place of Business

**237 LOOKOUT PLACE  
 SUITE 100  
 MAITLAND FL 32751  
 US**

Mailing Address

**P.O. BOX 1656  
 MAITLAND FL 32794-1656  
 US**

2. Principal Place of Business

**549 Wymore Road, North**

3. Mailing Address

Suite, Apt. #, etc.

**Suite 109**

City & State

**Maitland, FL**

City & State

4. FEI Number

**59-3304819**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**ICARDI, JEFFREY A**

**237 LOOKOUT PLACE**

**SUITE 100**

**MAITLAND FL 32751**

7. Name and Address of New Registered Agent

Name

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

**549 Wymore Road North**

**Suite 109**

City

**Maitland**

**FL**

Zip Code  
**32751**

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

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 ☐ Delete  
 NAME **DP**  
 STREET ADDRESS **ICARDI, JEFFREY A**  
 CITY-ST-ZIP **237 LOOKOUT PLACE, SUITE 100**  
**MAITLAND FL 32751**

TITLE ☐ Change ☐ Addition  
 NAME **549 Wymore Rd. North**  
 STREET ADDRESS **Suite 109**  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME **DST**  
 STREET ADDRESS **KULMAN, CHARLES E**  
 CITY-ST-ZIP **1421 NOTTINGHAM ST.**  
**ORLANDO FL 32803**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME **DV**  
 STREET ADDRESS **SEARS, ROBERT D.M.**  
 CITY-ST-ZIP **515 N FERNCREEK AVE.**  
**ORLANDO FL**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME **VD**  
 STREET ADDRESS **TIDWELL, MARK A**  
 CITY-ST-ZIP **1135 LAKE AVENUE**  
**CLERMONT FL**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

*Attachment*

*676177*  
*P9400006308*

**Icardi & Icardi, P.A.**  
549 Wymore Rd., North, Ste. 109  
Maitland, FL 32751  
(407) 647-1859  
Fax: (407) 647-3224  
[www.icardi.com](http://www.icardi.com)

# *Transmittal Memorandum*

*Date:* July 25, 2002

**TO:**

**Division of Corporations  
Uniform Business Report Filings  
Post Office Box 1500  
Tallahassee, FL 32302-1500**

**REGARDING: IN THE MARKET, INC.**

**SUBJECT:**

**Enclosed are the 2002 Uniform Business Reports and a check in the sum of \$550.00  
for the filing fee.**