

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000010228

1. Entity Name

DOMARC ENTERPRISES, INC.

Principal Place of Business

6704 S.W. 114TH PLACE
UNIT A
MIAMI FL 33173

Mailing Address

6704 S.W. 114TH PLACE
UNIT A
MIAMI FL 33173

2. Principal Place of Business

6614 SW 114TH PLACE UNIT D

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIAMI, Florida

City & State

Zip

33173

Country

USA

Zip

Country

4. FEI Number

65-0550973

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHWARTZ, DAVID R
6704 S.W. 114TH PLACE
UNIT A
MIAMI FL 33173

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Marcelo Cardoso (Marcelo Cardoso)

04/25/01

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, 2001 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

TITLE P
NAME SCHWARTZ, DAVID R
STREET ADDRESS 6704 S.W. 114TH PLACE, UNIT A
CITY-ST-ZIP MIAMI FL 33173 ☐ Delete

TITLE TS
NAME CARDOSO, MARCIO
STREET ADDRESS 6614 S.W. 114TH PLACE, UNIT D
CITY-ST-ZIP MIAMI FL 33173 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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

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:

Marcelo Cardoso (Marcelo Cardoso)

04/25/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90081 011 ***150.00



DO NOT WRITE IN THIS SPACE

0216656

CR2E034 (10/00)