

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P95000042045**1. Entity Name
MARCAT INTERNATIONAL, INC.**FILED****Apr 05, 2001 8:00 am**
Secretary of State

04-05-2001 90024 025 ***150.00

Principal Place of Business

**632 HEWETT DRIVE
ORLANDO FL 32807
US**

Mailing Address

**632 HEWETT DR
ORLANDO FL 32807****00031326**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0617343**

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

7. Name and Address of New Registered Agent

**LEMUS, ANTONIO CPA
112 MARCIA DR
ALTAMONTE SPRINGS FL 32714**Name
HUMBERTO N. COLLAZO, P.A.Street Address (P.O. Box Number is Not Acceptable)
3846 CURRY FORD RDCity
ORLANDO**FL**Zip Code
32806

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

ACCOUNTANT

DATE

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

(NOTE: Registered Agent signature required when reinstating)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
PEREZ, MARIA DEL ROSA
5832 AUVERS BLVD #108
ORLANDO FL 32807** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
DIAZ, MARIA R.
1021 VIEGO AVE
ORLANDO, FL 32822** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
LOVERA DE ILLAN, CATHERINE
5816 AUVERS BLVD #204
ORLANDO FL 32807** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
ILLAN, GUSTAVO
1021 VIEGO AVE
ORLANDO, FL 32822** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
GUSTAVO, ILLAN
5816 AUVERS BLVD #204
ORLANDO FL 32807** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
ILLAN, ALEJANDRO J.
1021 VIEGO AVE
ORLANDO, FL 32822** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
DIAZ, JESUS O.
1021 VIEGO, AVE
ORLANDO, FL 32822** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)