

2001 UNIFORM BUSINESS REPORT (UBR)

0320083

DOCUMENT # **[REDACTED]** P95000054221

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Entity Name
MARKET-WL & MGT CONSULTANTS INC

01 MAY 23 PM 2:53

Principal Place of Business
C/O FRANKLIN, P.A.
5 LAKE WORTH RD.
LAKE WORTH FL 33463

Mailing Address
C/O FRANKLIN, P.A.
5315 LAKE WORTH RD.
LAKE WORTH FL 33463
US



Principal Place of Business
2777 S CONGRESS AVE

3. Mailing Address
2777 S CONGRESS AVE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
LAKE WORTH FL

City & State
LAKE WORTH FL

Zip
33461

Country

4. FEI Number **65 0304233**

Applied For
 Not Applicable

6. Name and Address of Current Registered Agent
C/O FRANKLIN P.A.
5315 LAKE WORTH RD
LAKE WORTH FL 33463

7. Name and Address of New Registered Agent
Name: **Elliot Franklin**
C/O FRANKLIN PA
Street Address (P.O. Box Number is Not Acceptable)
2777 S CONGRESS AVE
City **LAKE WORTH** FL Zip Code **33461**

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

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

OFFICERS AND DIRECTORS		
P	SHORT, ROBERT J	<input type="checkbox"/> Delete
ST ADDRESS	5315 LAKE WORTH RD.	
-ST-ZIP	LAKE WORTH FL 33463	
		<input type="checkbox"/> Delete
		<input type="checkbox"/> Delete
		<input type="checkbox"/> Delete
		<input type="checkbox"/> Delete
		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2777 S CONGRESS AVE	
CITY-ST-ZIP	LAKE WORTH FL 33461	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		
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		

500004448645 Change Addition
-06/28/01--01019--010
******150.00 ****150.00**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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.

CR2E034 (10/00)

AD

[Handwritten signatures and dates]