

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000066178

1. Entity Name
MARK SEWING INC.

FILED
Mar 26, 2001 8:00 am
Secretary of State

03-26-2001 90030 023 ***150.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business 2217 SW 44TH TERRACE CAPE CORAL FL 33914 US	Mailing Address 2217 SW 44TH TERRACE CAPE CORAL FL 33914 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0606414	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

ZABOLOTNY, STEVE
19321-C HIGHWAY US 19 NORTH
STE. 601
CLEARWATER FL 33764

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 _____ (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) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZAJKOWSKI, MAREK 4829 TARPON CT. "C" CAPE CORAL FL 33907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ZAJKOWSKI, ANNA 4829 TARPON CT. "C" CAPE CORAL FL 33904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ZAJKOWSKI, MAREK 2217 SW 44 TERRACE CAPE CORAL FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ZAJKOWSKI, ANNA 2217 SW 44 TERRACE CAPE CORAL FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE 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: **ZAJKOWSKI, MAREK** 03.24.01 (941) 549 6873

CR2E034 (10/00)