

FILED
May 22, 2003 8:00 am
Secretary of State

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04-30-2003 90071 044 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P-96000 022419		
1. Entity Name T.G. ROBERTS MARKETING, INC.		
DO NOT WRITE IN THIS SPACE		
2. Principal Place of Business 3250 EMERALD POINTE DR Suite, Apt. #, etc. 304-A City & State HOLLYWOOD Zip 33021 Country USA		3. Mailing Address 3250 EMERALD POINTE DR Suite, Apt. #, etc. 304-A City & State HOLLYWOOD, FL Zip 33021 Country USA
		4. FEI Number 65-0649900 Applied For Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
DO NOT WRITE IN THIS SPACE		7. Name and Address of Current Registered Agent Name ROBERT T. GOLD Street Address (P.O. Box Number is Not Acceptable) 3250 EMERALD POINTE DR # 304A City HOLLYWOOD FL Zip Code 33021
		6. 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. Robert T. Gold, Pres. SIGNATURE Robert T. Gold DATE 4-23-03 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State		8. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSDT ROBERT GOLD 3250 EMERALD POINTE DR #304A HOLLYWOOD, FL, 33021	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD MICHAEL GOLD 3250 EMERALD POINTE DR #304A HOLLYWOOD, FL, 33021	TITLE NAME STREET ADDRESS CITY - ST - ZIP
TITLE NAME STREET ADDRESS CITY - ST - ZIP		DO NOT WRITE IN THIS SPACE
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12. 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 10 or on an attachment with an address, with all other like empowered.		
SIGNATURE: Robert T. Gold SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 4-23-03 Daytime Phone # 305-506-9104

CR2E034B (12/02)