

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

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90242 034 ***150.00

DOCUMENT # P96000036766

1. Entity Name

INTERNATIONAL MARKETING CONNECTION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3602 DMG DR

3. Mailing Address

3602 DMG DR

Suite, Apt. #, etc.

BUILDING #2

Suite, Apt. #, etc.

BUILDING #2

DO NOT WRITE IN THIS SPACE

City & State

LAKELAND, FL

City & State

LAKELAND, FL

4. FEI Number

59-3377352

Applied For

Not Applicable

Zip

33811

Country

POLK

Zip

33811

Country

POLK

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

CHARLES J. STARLING

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

3602 DMG DR, BLDG #2

City

LAKELAND

FL

Zip Code
33811

**DO NOT WRITE
IN THIS SPACE**

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

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)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.28

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
NAME
STREET ADDRESS
CITY- ST- ZIP

PD

STARLING, CHARLES J.

4282QUAIL HOLLOW

AUBURNDALE, FL 33823

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

VSTD

STARLING, SHIRLEY A.

428 QUAIL HOLLOW

AUBURNDALE, FL 33823

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles J. Starling CHARLES J. STARLING

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-02 (863) 644-8651

Date

Daytime Phone #

CR2E034B (12/01)