

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 29, 2002 8:00 am**  
**Secretary of State**

01-29-2002 90077 017 \*\*\*150.00

**DOCUMENT # P97000045344**

1. Entity Name

**MARTENS DUNAJ & MARLOWE, P.A.**

Principal Place of Business

~~201 S BISCAYNE BLVD~~  
~~SUITE 800~~  
~~MIAMI FL 33131~~

Mailing Address

~~201 S BISCAYNE BLVD~~  
~~SUITE 800~~  
~~MIAMI FL 33131~~

2. Principal Place of Business

**9130 S. Dadeland Blvd.**

3. Mailing Address

Suite, Apt. #, etc.

**Datran Two- PH 2**

City & State  
**MIAMI, FL**

City & State

**SAME**

Zip  
**33156**

Country

**MIAMI-Dade**

Zip

Country

4. FEI Number

**65-0759013**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MARLOWE, RONALD J**

~~201 S BISCAYNE BLVD~~ **9130 S. Dadeland Blvd.**  
~~SUITE 800~~ **Datran Two- PH 2**  
~~MIAMI FL 33131~~ **MIAMI, FL 33156**

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

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)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 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

TITLE **PTD** ☐ Delete  
NAME **MARLOWE, RONALD J**  
STREET ADDRESS ~~201 S BISCAYNE BLVD #800~~ **9130 S. Dadeland Blvd.**  
CITY-ST-ZIP ~~MIAMI FL 33131~~ **Datran Two- PH 2 MIAMI, FL 33156**

TITLE **VPSD** ☐ Delete  
NAME **DUNAJ, SHERRYLL M**  
STREET ADDRESS ~~201 S BISCAYNE BLVD #800~~ **9130 S. Dadeland Blvd.**  
CITY-ST-ZIP ~~MIAMI FL 33131~~ **Datran Two- PH 2 MIAMI, FL 33156**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
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:

**Sherryll M Dunaj, V.P. / Sec'y**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**1/15/02 670-3700 (305)**

CR2E034 (9/01)