

2001 UNIFORM BUSINESS REPORT (UBR)

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

03-26-2001 90056 015 ***150.00

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DOCUMENT # P97000063145

1. Entity Name
MARLONNA ENTERPRISES, INC.

Principal Place of Business 2578 LUCILLE DRIVE FT LAUDERDALE FL 33316	Mailing Address 2578 LUCILLE DRIVE FT LAUDERDALE FL 33316
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637286



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2108 Sunrise Key Blvd	3. Mailing Address 2108 Sunrise Key Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Ft Lauderdale	City & State Ft. Laud.	4. FEI Number 65-0773949	Applied For Not Applicable
Zip 33304	Country Broward	Zip 33304	Country Broward

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
FEDOR, MARIA
 2578 LUCILLE DRIVE
 FT LAUDERDALE FL 33316

7. Name and Address of New Registered Agent
 Name **Fedor, Maria**
 Street Address (P.O. Box Number is Not Acceptable)
2108 Sunrise Key Blvd.
 City **Ft Laud.** **FL** Zip Code **33304**

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 Maria Fedor Maria Fedor 3-16-2001
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, 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

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MAJER, MARIA 2578 LUCILLE DRIVE FT LAUDERDALE FL 33316 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD Donna Majer 2108 Sunrise Key Blvd Ft Laud 33304 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Maria Fedor 3-16-2001 (934) 524 4522
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)