

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2002 8:00 am
Secretary of State

08-04-2002 90163 017 ***150.00

DOCUMENT # P97000076922

1. Entity Name
MARVIAN ENTERPRISES, INC.

Principal Place of Business
P.O. BOX 822240
SOUTH FLORIDA FL 33082-2240

Mailing Address
P.O. BOX 822240
SOUTH FLORIDA FL 33082-2240



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3469351**

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LITTMAN, ERIC P
1428 BRICKELL AVENUE
8TH FLOOR
MIAMI FL 33131

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSD** ☐ Delete
NAME **BELTRAN, RAPHAEL**
STREET ADDRESS **P.O. BOX 822240**
CITY-ST-ZIP **SOUTH FLORIDA FL 33082-2240**

TITLE ☐ Change ☐ Addition
NAME **BELTRAN RAPHAEL**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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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:

SIGNATURE OF RAPHAEL BELTRAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/02
Date

Daytime Phone #

CR2E034 (4/02)

Attachment
#P97W00076922

July 24, 2002

972183

Secretary of State Office

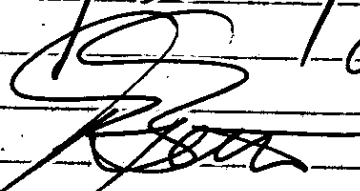
Enclosed you will find
the 2002 Uniform Business
Report and check for \$150.00

As I explained to your
office, I never received any
Uniform Business Report in
the mail except for this
one which was just
received.

According to my conversation
with the Secretary of State
Office, I hereby submit
payment of \$150.00 for the
annual fee for 2002.

Please kindly correct your
records and thank you
very much for your attention
to this matter.

Very truly yours,


Marion Enterprises