

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000101093

1. Entity Name  
**TYLER MARKETING, INC.**

**FILED**  
**May 10, 2000 8:00 am**  
**Secretary of State**

05-10-2000 90142 011 \*\*\*150.00

Principal Place of Business  
**1440 CORAL RIDGE DRIVE  
SUITE 360  
CORAL SPRINGS FL 33071**

Mailing Address  
**1440 CORAL RIDGE DRIVE  
SUITE 360  
CORAL SPRINGS FL 33071-5433**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number **65-0810485**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
**WURTZEL, TODD  
12224 W. SAMPLE ROAD  
CORAL SPRINGS FL 33065**

7. Name and Address of New Registered Agent  
Name **Wurtzel, Todd**  
Street Address (P.O. Box Number is Not Acceptable)  
**11408 NW 20th Drive**  
City **Coral Springs** **FL** Zip Code **33071**

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, 2000 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	<input type="checkbox"/> Delete
	D	WURTZEL, TODD	12224 W. SAMPLE ROAD CORAL SPRINGS FL 33065	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	D	Wurtzel, Todd	11408 NW 20th Drive Coral Springs, FL. 33071	
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<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: **Todd Wurtzel** *[Signature]* **4/22/00** **954-560-8595**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)