

FILED  
Jul 08, 2002 8:00 am  
Secretary of State

07-08-2002 90228 036 \*\*\*150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000000240

1. Entity Name  
MARION MANAGEMENT USA, INC.

Principal Place of Business  
1762 MARTHA LANE  
CLEARWATER FL 33756

Mailing Address  
1762 MARTHA LANE  
CLEARWATER FL 33756



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
1651 ROSELY  
Suite, Apt. #, etc.

3. Mailing Address  
1651 ROSELY  
Suite, Apt. #, etc.

City & State  
LARGO  
Zip 33771 Country

4. FEI Number 59-3483415

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

BERDYCHOWSKI, MARIANNA  
1762 MARTHA LANE  
CLEARWATER FL 33756

7. Name and Address of New Registered Agent

Name BERDYCHOWSKI MARIANNA  
Street Address (P.O. Box Number is Not Acceptable)  
1651 Rosely Rd E  
City LARGO FL Zip Code 33771-1679

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	BERDYCHOWSKI, KAZIMIERZ	1762 MARTHA LANE	CLEARWATER FL 33756	<input type="checkbox"/>
V	BERDYCHOWSKI, MARIANNA	1762 MARTHA LANE	CLEARWATER FL 33756	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	1651 Rosely Rd E	LARGO FL	33771	<input type="checkbox"/>	<input type="checkbox"/>
	1651 Rosely Rd E	LARGO FL	33771	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Marianne Berdychowski  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.27.02

Date

Daytime Phone #

CR2E034 (9/01)