

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 18, 2003 8:00 am
Secretary of State

08-18-2003 90163 031 ***550.00

DOCUMENT # P98000024825

1. Entity Name

MASTER MARKETING SPECIALIST INC.



Principal Place of Business

**3111 UNIVERSITY DRIVE
STE 621
CORAL SPRINGS FL 33065
US**

Mailing Address

**3111 UNIVERSITY DRIVE
STE 621
CORAL SPRINGS FL 33065
US**

2. Principal Place of Business

3. Mailing Address

3111 N. UNIVERSITY DR

Suite, Apt. #, etc.

Suite 621

City & State

CORAL SPRINGS

Zip

33076

Country

US

City & State

CORAL SPRINGS

Zip

33076

Country

US



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0832917**

Applied For

☐ Not Applicable

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

**DEL REY, OSCAR
4751 NW 58TH AVE
CORAL SPRINGS FL 33067**

Name **DEL REY, OSCAR**
Street Address (P.O. Box Number is Not Acceptable)

10228 NW 62 CT.

City

PARKLAND

FL

Zip Code

33076

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

Oscar Del Rey
Signature, typed or printed name of registered agent and title if applicable.

OSCAR DEL REY

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **DEL REY, OSCAR**
STREET ADDRESS **4751 NW 58TH AVE**
CITY-ST-ZIP **CORAL SPRINGS FL 33067**

TITLE **P, V, T, S, D** ☒ Change ☐ Addition
NAME **OSCAR DEL REY**
STREET ADDRESS **10228 NW 62 CT.**
CITY-ST-ZIP **PARKLAND, FL 33076**

TITLE **VTD** ☒ Delete
NAME **DEL REY, PAMELA**
STREET ADDRESS **4751 NW 58TH AVE**
CITY-ST-ZIP **CORAL SPRINGS FL 33067**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oscar Del Rey
OSCAR DEL REY

7/30/03

Date

954-796-1999

Daytime Phone #

CR2E034 (4/03)