

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000036702

1. Entity Name

LUKE & KAREN MARKETING, INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90161 002 ***150.00

Principal Place of Business

800 NORTH BELCHER ROAD
CLEARWATER FL 33765

Mailing Address

60 LAKEVIEW CT
PALM HARBOR FL 34683-2906

2. Principal Place of Business

60 LAKEVIEW CT.

3. Mailing Address

Suite, Apt. #, etc.

City & State

PALM HARBOR FL

City & State

4. FEI Number

59-3511541

Applied For

Not Applicable

Zip

34683-2906

Country

USA

Zip

Country

5. Certificate of Status Desired ☐ -

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LUKACS, STEPHEN M
800 NORTH BELCHER ROAD
CLEARWATER FL 33765

7. Name and Address of New Registered Agent

Name

LUKACS, STEPHEN M

Street Address (P.O. Box Number is Not Acceptable)

60 LAKEVIEW CT

City

PALM HARBOR

FL

Zip Code

34683

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

Stephen M. Lukacs

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/10/00

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 ☐ Delete
NAME D
STREET ADDRESS LUKACS, STEPHEN M
CITY-ST-ZIP 60 LAKEVIEW CT.
PALM HARBOR FL 34683

TITLE ☐ Delete
NAME S
STREET ADDRESS LUKACS, KAREN.
CITY-ST-ZIP 60 LAKEVIEW CT.
PALM HARBOR FL 34683

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-ZIP

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:

Stephen M. Lukacs
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/10/00

Daytime Phone #

727-781-5506

CR2E034 (9/99)