Applied For Not Applicable

\$8.75 Additional

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000081917

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

MARLOWE BUSINESS SERVICES, INC.

| Principal Place of Business | Mailing Address | |
|--|--|--|
| 3011 TANGERINE TERRACE PALM HARBOR FL 34684 | 3011 TANGERINE TERRACE PALM HARBOR FL 34684 | |

26

2a. Mailing Address

Suite, Apt. #, etc.

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90226 037 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

09/22/1998

4. FEI Number

| 22 | | | 27 | | | | | | 5. Certificate of Status Desired | | | Fee Re | quired |
|---|--|---|-----------|-----------------------------|-------------------------------------|--|------------------------------|----------------------------------|---------------------------------------|---------------------------------------|------------|-----------|-------------------|
| City & State | e | | 1=- | City & St | ate | | | | 6. Election Campaign Financing | g 🗆 | 5 | 5,00 | May Be |
| 23 | | | 28 | | | | | | Trust Fund Contribution | ,a 🗆 | | Added to | |
| Zip | | Country | T ' | Zip | | Country | <i>y</i> | | 8. This corporation owes the c | urrent year | r Intangib | le | |
| 24 | 25 | | 29 | | 30 | D | | | Personal Property Tax. | | <u> </u> | es | No |
| | 9. Name and | Address of Current | Regi | stered Age | ent | | | | 10. Name and Address of Nev | v Register | red Ager | ıt | |
| | | | | | | 81 | Na | ne | | | | | |
| AMERILAWYER 343 ALMERIA AVENUE | | | | | 82 | Stre | et Addre | ess (P.O. Box Number is Not Acce | ptable) | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | | | " | | | | | | | |
| COR | ial gables f | L 33134 | | | | 83 | 1 | | | | | | |
| | | | | | | 84 | City | | | | 85 | Zip C | ode |
| | | | | | | 04 | | | | F | FL °° | | |
| 11. Pursuant | to the provisions | of Sections 607.0502 | and (| 607.1508, F | lorida Statutes, | the above | e-nam | ed corpo | oration submits this statement for t | he purpose | e of chan | ging its | registered |
| office or re | egistered agent, | or both, in the State of and accept the obligation | of Flori | ida. Such d f. Section 6 | hange was auth i07.0505. Florid: | iorized by a Statutes | / the c s. | orporatio | n's board of directors. I hereby acc | cept the ap | pointme | nt as reg | Jisterea |
| - | ······································ | me accept are congu- | | ., | | | | | | | | | |
| SIGNATURE | Signature, typed or pr | inted name of registered agent | and title | if applicable. | (NOTE: Re | egistered Age | nt signat | ure required | s when reinstating) | DATE | | | |
| 12. | | OFFICERS AND | D DIR | ECTORS | | 13. | | | ADDITIONS/CHANGES TO | OFFICERS | | | |
| TITLE | PD | | | | DELETE | 1.1 TITLE | | İ | | | | Change | Addition Addition |
| NAME . | LOWE, GLOI | RIANNE | | | | 1.2 NAME | | | | | | | |
| STREET ADDRESS | 3011 TANGE | RINE TERRACE | | | | 13 STREE | TADDR | ss | | | | | |
| CITY-ST-ZIP | PALM HARB | OR FL 34684 | | | | 1.4 CITY-S | ST-ZIP | <u> </u> | | | | | |
| TITLE | VSTD | | | Ī | DELETE | 2.1 TITLE | | | | | | Change | Addition |
| NAME | MARSH, MA | RY F | | | | 2.2 NAME | | | | | | | |
| STREET ADDRESS | 3011 TANGE | RINE TERRACE | | | | 2.3 STREE | T ADDRI | SS | | | | | |
| CITY-ST-ZIP | PALM HARB | OR FL 34684 | | | | 2.4 CITY-5 | ST-ZIP | | | | | | |
| TITLE | | | | 1 | □ DELETE | 3.1 TITLE | | 1 | | | | Change | Addition |
| NAME | | | | | | 32 NAME | | | | | | | |
| STREET ADDRESS | | | | | | 3.3 STREE | T ADDRI | ss | | | | | |
| CITY-ST-ZIP | | | | | | 3.4. CITY-5 | ST-ZIP | | | | | | |
| TITLE | | | | | DELETE | 4.1 TITLE | | | | | | Change | ☐ Addition |
| NAME | | | | | | 4. 2 NAME | | | | | | | |
| STREET ADDRESS | | | | | | 4.3 STREE | TADOR | ESS | | | | | |
| CITY-ST-ZIP | | | | | | 4.4 CITY-S | ST-ZIP | | | | | | |
| | | | | | DELETE | 5.1 TITLE | | Ī | | | | Change | ☐ Addition |
| TITLE | l | | | | | 5.2 NAME | | | | | | | |
| NAME | | | | | | | | | | | | | |
| | | | | | | 5.3 STREE | T ADDRI | ss | | | | | |
| NAME | | | | | | 5.4 CITY-S | | ESS | | | <u> </u> | | |
| NAME STREET ADDRESS | | | | Ć | _ DELETE | 1 | | ESS | | | | Change | Addition |
| NAME STREET ADDRESS CITY-ST-ZIP | | | | | _ DELETE | 5.4 CITY-S | ŞT-ZIP | SS | <u> </u> | | | Change | ☐ Addition |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE | | | | C | □ DELETE | 5.4 CITY-S 6.1 TITLE | ŞT- ZIP | | | | | Change | ☐ Addition |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | 5.4 CITY-S 6.1 TITLE 6.2 NAME 6.3 STREE 6.4 CITY-S | ST-ZIP ET ADDRI ST-ZIP | ESS | Section 119.07(3)(i), Florida Statute | | | | _ |