

67-03
FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

03 JAN 28 AM 9:08

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P98000090402

1. Entity Name

MARCO ISLAND HOLIDAYS, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

859 WINTERGREEN CT. 7720 SW 78 ST.

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

400011127434

01/28/03--01040--005 **300.00

DO NOT WRITE IN THIS SPACE

City & State

MARCO ISLAND, FL

City & State

MIAMI, FL

4. FEI Number

65-0898412

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name MARIA T. BARBEITO-LOVETT

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

7720 SW 78 ST.

City

MIAMI

FL

Zip Code

33143

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE DIRECTOR
NAME BARBEITO, ANTONIO
STREET ADDRESS 859 WINTERGREEN CT.
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE DIRECTOR
NAME BARBEITO, MARIA ELENA
STREET ADDRESS 859 WINTERGREEN CT.
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE DIRECTOR
NAME BARBEITO-LOVETT, MARIA T.
STREET ADDRESS 859 WINTERGREEN CT.
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE PRESIDENT
NAME BARBEITO, JACQUELINE
STREET ADDRESS 859 WINTERGREEN CT.
CITY-ST-ZIP MARCO ISLAND, FL 34145

TITLE
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CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Jacqueline Barbeito / JACQUELINE BARBEITO 1/24/03 (305) 460.2139

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)

75 1/25

MARCO ISLAND HIDEAWAYS, INC.

7720 SW 78 ST.

Miami, FL 33143

01/24/03

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

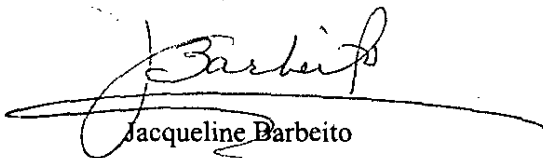
Re: P98000090402

Dear Sir/Madam:

I am writing to respectfully request a waiver of the additional re-activation fee due to the fact that our UBR was not received in the previous year. The address change was requested during the last filing as a result of not having received the UBR as well. Apparently, after this request, the address of the 'registered agent' and not the 'mailing address' was changed. I have enclosed the completed UBR for 2002 / 2003 and a check for \$300.

If you have any questions, please contact me at 305-460-2139 or 305-794-1010. Thanks in advance for your assistance on this matter.

Sincerely,



Jacqueline Barbeito