

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State
 02-25-2002 90023 010 ***150.00

DOCUMENT # P99000005681

1. Entity Name
MARTL INTERNATIONAL CORP.

Principal Place of Business

~~6216 NW 24TH ST~~
~~BOCA RATON FL 33434-4315~~

Mailing Address

~~PO BOX 811492~~
~~BOCA RATON FL 33481~~

00033341



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1819 NE 25 STREET

3. Mailing Address

2409 NE 27 STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LIGHTHOUSE POINT, FL

City & State

LIGHTHOUSE POINT, FL

4. FEI Number

65-0905750

Applied For

Not Applicable

Zip

33064

Country

USA

Zip

33064

Country

USA

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

MARTL, NADA

~~6216 NW 24TH ST~~

~~BOCA RATON FL 33434-4215~~

2409 NE 27 STREET

LIGHT HOUSE POINT

FL 33064

Name

MARTL, NADA

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

2409 NE 27 STREET

City

LIGHTHOUSE POINT

FL

Zip Code

33064

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 *Nada Martl* **NADA MARTL, PRESIDENT/DIRECTOR** **Feb 13, 2002**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **MARTL, NADA** ✓
 STREET ADDRESS ~~6216 NW 24TH ST~~ **2409 NE 27 ST**
 CITY-ST-ZIP ~~BOCA RATON FL 33434~~ **LIGHTHOUSE POINT**

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

TITLE **VP** ☐ Delete
 NAME **MAERTL, CHRISTIAN** ✓
 STREET ADDRESS **6216 NW 24TH ST**
 CITY-ST-ZIP **BOCA RATON FL 33434-4315**

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

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: *Nada Martl* **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 13, 2002

Date

561-866-5115

Daytime Phone #

CR2E034 (9/01)