## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jan 24, 2002 8:00 am DOCUMENT # P99000029159 **Secretary of State** 1. Entity Name 01-24-2002 90124 001 \*\*\*150.00 M.J.R. MARKETING AND RESEARCH CORP. 01-24-2002 90124 002 \*\*\*\*\*8.75 Principal Place of Business Mailing Address 3131 MELTON ST. NORTH 3131 MELTON ST. NORTH ST. PETERSBURG FL 33704-1956 ST. PETERSBURG FL 33704-1956 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3585185 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RIVERS. EDWARD E JR. Street Address (P.O. Box Number is Not Acceptable) 3131 MELTON ST. NORTH ST. PETERSBURG FL 33704-1956 City Zip Code 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE Change ☐ Addition NAME RIVERS, DAVID NAME STREET ADDRESS 3131 MELTON ST. NORTH STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33704-1956 CITY-ST-ZIP TITLE SD ☐ Delete TITLE ☐ Change ☐ Addition NAME RIVERS, MARK NAME STREET ADDRESS 3131 MELTON ST. NORTH STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33704-1956 CITY-ST-ZIP Delete TITLE TD Change ☐ Addition NAME RIVERS, EDWARD E JR. NAME STREET ADDRESS 3131 MELTON ST. NORTH STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG FL 33704-1956 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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

iens from Edward Rivers Ir.

SIGNATURE:

1-7-02
Daytime Phone #

FILED