

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000038464

FILED
Jan 22, 2003
Secretary of State

Entity Name: MARCOSCHAMER GROUP, INC.

Current Principal Place of Business:

200 ISLAND BLVD.
SUITE 1910
WILLIAMS ISLAND, FL 33160

Current Mailing Address:

200 ISLAND BLVD.
SUITE 1910
WILLIAMS ISLAND, FL 33160

New Principal Place of Business:

2000 ISLAND BLVD.
SUITE 1910
WILLIAMS ISLAND, FL 33160

New Mailing Address:

2000 ISLAND BLVD.
SUITE 1910
WILLIAMS ISLAND, FL 33160

FEI Number: 65-0914360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCOSCHAMER, SAMUEL M
2000 ISLAND BLVD.
SUITE 1910
WILLIAMS ISLAND, FL 33160 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARCOSCHAMER, SAMUEL
Address: 2000 ISLAND BLVD. SUITE 1910
City-St-Zip: WILLIAMS ISLAND, FL 33160

Title: D () Delete
Name: MARCOSCHAMER, HELEN
Address: 2000 ISLAND BLVD. SUITE 1910
City-St-Zip: WILLIAMS ISLAND, FL 33160

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: MARCOSCHAMER, SAMUEL M
Address: 2000 ISLAND BLVD. SUITE 1910
City-St-Zip: WILLIAMS ISLAND, FL 33160

Title: S/D (X) Change () Addition
Name: MARCOSCHAMER, HELEN
Address: 2000 ISLAND BLVD. SUITE 1910
City-St-Zip: WILLIAMS ISLAND, FL 33160

Title: M/D () Change (X) Addition
Name: MARCOSCHAMER, YAIR
Address: 2000 ISLAND BLVD. SUITE 1910
City-St-Zip: WILLIAMS ISLAND, FL 33160

Title: T/D () Change (X) Addition
Name: MARCOSCHAMER, JONATHAN
Address: 2000 ISLAND BLVD. SUITE 1910
City-St-Zip: WILLIAMS ISLAND, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL MARCOSCHAMER

P/D

01/22/2003

Electronic Signature of Signing Officer or Director

Date