## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P99000060927**

Country

6. Name and Address of Current Registered Agent

City & State

Zip

## FRANZEN MARKETING & CONSULTANTS GROUP CORP.

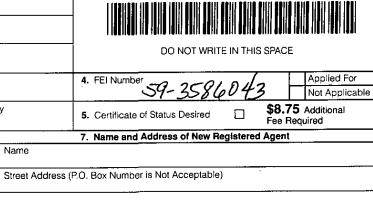
Principal Place of Business	Mailing Address		
GLEN LAKES BOULEVARD NORTH FROM PETERSBURG FL 33702	1880 GLEN LAKES BOULEVARD NORTH SAINT PETERSBURG FL 33702-2160		
2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		

City & State

## **FILED** Apr 22, 2000 8:00 am Secretary of State

04-22-2000 90005 022 \*\*\*150.00

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SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES FL 33134			Street Address (P.O. Box Number is Not Acceptable)			
			City		FL Zip Code	-1-1
. The above	named entity submits this statement for the	e purpose of changing its req	gistered office or registered	agent, or both, in the State of Florida	1.	-
IGNATURE _	Signature, typed or printed name of registered agent and t	itle if applicable. (NOTE: Re	egistered Agent signature required who	en reinstating)	DATE	<del></del>
This corporate Tax filing re	ration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	FILE NOW!!! After MAY 1, 2000	FEE IS \$150.00 Fee will be \$550.00 to Department of State	Election Campaign Financ     Trust Fund Contribution.		May Be to Fees
1.	OFFICERS AND DIF	RECTORS	12.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS	N 11
ITLE IAME TREET ADORESS	PD FRANZEN, DOUGLAS P 1880 GLEN LAKES BOULEVARD NO SAINT PETERSBURG FL 33702	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	VD FRANZEN, SUSAN M 1880 GLEN LAKES BOULEVARD NO SAINT PETERSBURG FL 33702	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	and the second s	Change	Addition
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Country

Name

indicated on this report or 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 supplied at 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 of 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR