

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000065026

1. Entity Name

MINARK GROUP REALTY, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90063 023 ***150.00

Principal Place of Business

5338 1ST AVENUE NORTH
ST PETERSBURG FL 33710

Mailing Address

5338 1ST AVENUE NORTH
ST PETERSBURG FL 33710-8106

2. Principal Place of Business

641 49th ST N
Suite, Apt. #, etc.

3. Mailing Address

641 49th ST N
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

ST. Pete

City & State

ST. Pete

4. FEI Number

593588190

Applied For

Not Applicable

Zip

FL

Country

Pinellas

Zip

33710

Country

Pinellas

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MLINARICH, DEAN R
5338 1ST AVENUE NORTH
ST PETERSBURG FL 33710

7. Name and Address of New Registered Agent

Name Dean R. Mlinarich

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

641 49th ST. N.

City ST. Petersburg

FL

Zip Code

33710

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

Dean R. Mlinarich
(NOTE: Registered Agent signature required when reinstating)

4/28/00
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, 2000 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

TITLE DSPT
NAME MLINARICH, FAY B
STREET ADDRESS 5338 1ST AVENUE NORTH
CITY-ST-ZIP ST PETERSBURG FL 33710 ☒ Delete

TITLE President / Sec. / Treas
NAME Dean R. Mlinarich
STREET ADDRESS 641 49th ST. N.
CITY-ST-ZIP ST. Pete FL 33710 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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 title empowered.

SIGNATURE: Dean R. Mlinarich

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00
Date

722-328-4747
Daytime Phone #

CR2E034 (9/99)