

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000088957

1. Entity Name

MARKEN, INC.

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90022 024 ***150.00

Principal Place of Business

HOLMES BEACH COIN LAUNDRY
107 6TH STREET NORTH
BRADENTON BEACH FL 34217

Mailing Address

HOLMES BEACH COIN LAUNDRY
107 6TH STREET NORTH
BRADENTON BEACH FL 34217-3307

2. Principal Place of Business

Holmes Beach Coin Laundry

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5400 MARINA DRIVE

City & State

HOLMES BEACH, FL

City & State

Zip

34217

Country

MINATEE

Zip

Country

4. FEJ Number

65-0955087

Applied For

Not Applicable

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

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

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

City

FL

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)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD ☐ Delete
NAME KELLEY, MARGARET J
STREET ADDRESS 107 6TH STREET NORTH
CITY-ST-ZIP BRADENTON BEACH FL 34217

TITLE SEEPT. ☐ Change ☒ Addition
NAME KENNETH W. KELLEY
STREET ADDRESS 107 6TH ST. NORTH
CITY-ST-ZIP BRADENTON BEACH, FL 34217

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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: Margaret J. Kelley MARGARET J. KELLEY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

45-00

Date

941 778-1208

Daytime Phone #