2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S39114

1. Entity Name

MARKETING CREATIONS, INC.

FILED
Jul 13, 2000 8:00 am
Secretary of State
07-13-2000 90021 036 ***150.00

Principal Place of Business	Mailing Address
7776 TRAVELERS TREE DR. BOCA RATON FL 33433 US	7776 TRAVELERS TREE DR. BOCA RATON FL 33433 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 22-2225662 ☐ 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
LEVINE, STEWART D. 7761 TRAVELLERS TREE DR. BOCA RATON FL 33433	Name LEVINE, STEWART D. Street Address (P.O. Box Number is Not Acceptable) 7776 TRAVELERS TREE DRIVE City BOCA RATON FL Zip Code 33433

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 $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
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	DPT ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	LEVINE, STEWART D.	NAME	
STREET ADDRESS	7761 TRAVELLERS TREE DR.	STREET ADDRESS	7776 TRAVELERS TREE DR.
CITY-ST-ZIP	BOCA RATON FL	CITY-ST-ZIP	
TITLE	DVS ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	LEVINE, SANDRA	NAME	
STREET ADDRESS	7761 TRAVELLERS TREE DR.	STREET ADDRESS	7776 TRAVELERS TREE DR.
CITY-ST-ZIP	BOCA RATON FL	CITY-ST-ZIP	
TITLE	☐ 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	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	

CR2E034 (5/00)

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: Stewart D. Levine 561-394-9770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
DH 539114
DW 69893

from the
DESK
of **SANDY LEVINE**

7/7/00
To: Florida Dept. of State - Div. of Corp.

Marketing Creations moved in August, 1999. All of our mail was supposed to be forwarded to our new address. However, we never received any forms prior to this 2ND Notice.

When I called your office today, Stacey answered the phone and told us that we could send in the orginal $150. only, along with this explanation.

We would be most appreciative if you would wave the penalty. We are a small business, and the additional $400 - is quite a hardship.
Thank you. Sandy Levine
Secretary