2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **V28105**

Entity Name

T & G MARKETING, INC.

Principal Place of Business

Mailing Address

City & State

2310 SE 2ND ST. STE 5 BOYNTON BEACH FL 33435

City & State

2310 SE 2ND ST. STE 5 BOYNTON BEACH FL 33435

BOYNTON BEACH FL 33435
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

FILED Mar 06, 2001 8:00 am Secretary of State

03-06-2001 90343 035 ***158.75

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Applied For



DO NOT WRITE IN THIS SPACE

65-0326506

4. FEI Number

Section Country Country Section Sect						00 002000	N	ot Applicable	İ
CONRAD, GLORIA L 6439 CROOKED STICK COURT LAKE WORTH FL 33463 City FL Zip Code	Zip	Country	Zip	Country	5.	. Certificate of Status Desired			
CONPAD, GLORIA L 6439 CROOKED STICK COURT LAKE WORTH FL 33463 City FL Zip Code		6. Name and Address of Current R	egistered Agent		7.	Name and Address of New Regis	tered Agent		
CONRAD, GLORIA L 6439 CROOKED STICK COURT LAKE WORTH FL 33463 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 Synthem, fixed by presend were of registered agent, and both in the State of Florida. SIGNATURE Synthem, fixed by presend were of registered agent, or both, in the State of Florida. SIGNATURE Synthem, fixed by presend were of registered agent, or both, in the State of Florida. SIGNATURE Synthem, fixed by presend were of registered agent, or both, in the State of Florida. SIGNATURE Synthem, fixed by presend were of registered agent, or both, in the State of Florida. SIGNATURE Synthem, fixed by presend were of registered agent, or both, in the State of Florida. SIGNATURE Synthem, fixed by presend were of registered agent, or both, in the State of Florida. SIGNATURE Synthem, fixed by presend were of registered agent, or both, in the State of Florida. SIGNATURE Synthem, fixed by presend were of registered agent, or both, in the State of Florida. SIGNATURE Synthem, fixed by presend were of registered agent, or both, in the State of Florida. SIGNATURE Synthem, fixed by presend were of registered agent, or both, in the State of Florida. SIGNATURE Synthem, fixed by presend were or receiving. Added to Fee will be \$550.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. State Added to Fee will be \$550.00 Make Check Payable to Department of State Synthem Added to Fee will be \$550.00 Make Check Payable to Department of State Synthem Added to Fee will be \$550.00 Make Check Payable to Department of State Synthem Added to Fee will be \$550.00 Make Check Payable to Department of State Synthem Added to Fee will be \$550.00 Make Check Payable to Department of State Synthem Added to Fee will be \$550.00 Make Check Payable to Department of State Synthem Added to Fee will be \$550.00 Make Check Payable to	السعام الأستاحون		Single of the with the second	Name					_
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8. The above named ontity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SignATURE 9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees Addition Make Check Payable to Department of State Addition TITLE PD CONRAD, THOMAS R. STREET ADDRESS TITLE PD CONRAD, STICK COURT LAKE WORTH FL 33483 Delete TITLE VTD CONRAD, BICHARD M Delete TITLE WORTH FL 33483 Delete	LAKE	WORTH FL 33463							ĺ
SIGNATURE 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) 11.				City			FL Zip Cod	ie	
9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. \$5.00 May Be Added to Fees	8. The above	named entity submits this statement for	the purpose of changing its	registered office or r	egistered a	agent, or both, in the State of Florida			ł
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		ertify that the information supplied with the	his filing does not qualify for		d in Section	n 119 07(3\(i). Florida Statutes ∮furti	ner certify that the i	nformation	

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/00 Date 561-736-9022

Daytime Phone #