## FILED 2003 FOR PROFIT CORPORATION Sep 10, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) P00000005645 **DOCUMENT #** 09-10-2003 90065 016 \*\*\*150 00 1. Entity Name H20 MARTY, INC. Principal Place of Business Mailing Address 4561 POWERLINE AT PO BOX 23957 OAKLAND PARK FL 33309 FORT LAUDERDALE FL 33307-3957 2. Principal Place of Business 3. Mailing Address 2408 ADAMS STREET Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For 65-0973629 COUNTION Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Bea BROWARD Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WALDRON, MARTIN A 2408 ADAMS STREET Street Address (P.O. Box Number is Not Acceptable) 4170-NW 10 JERRACE HOLYWOOD FT. LAUDERDANE FL 33309 FL 33020 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Addition ☐ Delete Change WALDRON, MARTIN A NAME NAME 417-0 NW 10TH TERRACE 24 08 ADAMS ST STREET ADDRESS STREET ADDRESS FORT-LAUDERDALE-EL 33307 HOUSE F CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Addition TITLE ☐ Change 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-7IP Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP---Delete TITLE Change ☐ Addition NAME NAME

12. Thereby 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 10 or Block 11 if of the corporation or the receiver or trustee emp changed, or on an attachment with an address? like empowered.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

**SIGNATURE** 

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

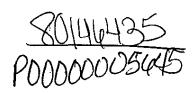
NAME

☐ Delete

☐ Change

☐ Addition

## Attachment



## H20 MARTY, INC. PO BOX 23957 FT. LAUDERDALE, FL 33307

September 3<sup>rd</sup>, 2003

Uniform Business Report Division of Corporation P.O. Box 1500 Tallahassee, FL 32302-1500

> Re: H20 Marty, Inc. Id# 65-0973629

Document # P00000005645

Dear Sirs,

Attached please find a completed Uniform Business Report (UBR) form for the year 2003 as well as the \$150.00 filing fee. I have completed the second notice form as I never received an original. I therefore, request an abatement of the \$400.00 penalty.

Thank you for your assistance in the matter.

Very truly yours,

Martin Waldron

President