

2000 UNIFORM BUSINESS REPORT (UBR)

PS192

DOCUMENT # 592292

1. Entity Name
ROSSI ELECTRIC, INC.

FILED
00 AUG -3 AM 8:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 2179 SW 56 TERR PO BOX 4866 W HOLLYWOOD FL 33023 US	Mailing Address P.O. BOX 4866 PO BOX 4866 W HOLLYWOOD FL 33083 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-2024255	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROSSI, RICHARD
2179 S.W. 56TH TERRACE
HOLLYWOOD FL 33023

7. Name and Address of New Registered Agent
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 _____ (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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROSSI, RICHARD 2179 SW 56 TERRACE HOLLYWOOD FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	000003361580-8 -08/18/00--01009--029 ****150.00 ****150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Richard Rossi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/21/2000
Date

Daytime Phone #

CR2E034 (5/00)

SP

pg 2 of 2

ROBERT A. GIACIN, EA

Established 1963

2131 Hollywood Boulevard Suite 101
Hollywood, Florida 33020-6728
Hours by appointment
Voice 954-922-3282 Fax 954-922-3592
E-mail bobg101@mindspring.com

ENROLLED TO PRACTICE BEFORE THE
UNITED STATES INTERNAL REVENUE SERVICE

July 20, 2000

Secretary of State
Honorable Katherine Harris
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Rossi Electric, Inc. Annual Report

Dear Madam Secretary:

Enclosed herewith is the executed 2000 Uniform Business Report for my above client, along with his check for \$150.00.

I am asking that the Department accept his check without billing for additional balance due for the late filing and paying.

It was my responsibility as the corporations accountant to have brought the filing and paying to my clients attention in a timely manner prior to the first May filing deadline. I failed to do this due to an oversight by one of my employees.

Accordingly, I am asking that he not be assessed the higher late pay fee and that the enclosed form and check be accepted as an original timely filed return.

Your cooperation would be greatly appreciated. Steps have been taken to not allow this to happen again.

Respectfully,


Robert A. Giacini EA

Enc: UBR and check #2646 for \$150.00