2001 UNIFORM BUSINESS REPORT (UBR)

Feb 27, 2001 8:00 am **DOCUMENT # K55041 Secretary of State** 1. Entity Name SFD, INC. 02-27-2001 90310 024 ***150.00 Principal Place of Business Mailing Address 2209 40TH ST P O BOX 5085 626177 TAMPA FL 33605 TAMPA FL 33675 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-2922322 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GUAGLIARDO, SAL Street Address (P.O. Box Number is Not Acceptable) 6602 GLENCOE DR TEMPLE TERRACE FL 33617 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE TITLE Change ☐ Addition ☐ Delete NAME GUAGLIARDO, SALVATORE J. NAME STREET ADDRESS STREET ADDRESS 2209-40TH ST. CITY-ST-ZIP CITY-ST-ZIP TAMPA FL TITLE ☐ Delete TITLE ☐ Change NAME GUAGLIARDO, SALVATORE J. NAME STREET ADDRESS STREET ADDRESS .2209-40TH ST. CITY-ST-ZIP CITY-ST-ZIP <u>Tampa</u> Fl 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-ZIF 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 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SAL GUAGLIARDO

Daytime Phone #

CR2E034 (10

CORPORATE DETAIL RECORD SCREEN 1/31/01

2:51 PM

CHANGED: 02/26/93

NUM: K55041 ST:FL ACTIVE/FL PROFIT FLD: 12/30/1988 EFF: 12/29/1988

FLD: 09/20/1996

LAST: REINSTATEMENT FEI#: 59-2922322

MAILING

NAME : SFD, INC.

CHANGED: 02/26/93 PRINCIPAL: -2209 -40TH ST

TAMPA, FL 33605 US ADDRESS

: P O BOX 5085

TAMPA, FL 33675 US

ADDRESS RA NAME : GUAGLIARDO, SAL

: 6602 GLENCOE DR RA ADDR

NAME CHG: 06/07/89 ADDR CHG: 06/07/89

TEMPLE TERRACE, FL 33617 US

: (1998) BY 01/22/98 (1999) A 02/03/99 (2000) A 08/16/00 ANN REP

OFFICER/DIRECTOR DETAIL SCREEN 2:52 PM 1/31/01

CORP NUMBER: K55041

TITLE: PST

CORP NAME: SFD, INC. NAME: GUAGLIARDO, SALVATORE J.

2209-40TH ST.

TAMPA, FL

NAME: GUAGLIARDO, SALVATORE J. TITLE: D

2209-40TH ST.

TAMPA, FL