

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 13, 2001 8:00 am
Secretary of State

05-10-2001 90071 008 ***150.00

DOCUMENT # P00000030978

1. Entity Name
THE GREAT IMPASTA, INC.

Principal Place of Business

Mailing Address

~~14561 U.S. #1~~
~~JUNO BEACH FL 33408~~

~~14561 U.S. #1~~
~~JUNO BEACH FL 33408~~

14261 US HWY ONE
JUNO BEACH FL 33408 ← SAME

76390



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

650997221

Applied For

Not Applicable

Zip

Country

Zip

Country

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

COVERT, STEPHEN ESQ.
5606 P.G.A. BOULEVARD
SUITE 211
PALM BEACH GARDENS FL 33418

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

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 12, 2001 Fee 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 Delete
 NAME **STD**
MICELI, JOSEPH
 STREET ADDRESS **10166 SIENNA OAKS CIRCLE EAST**
 CITY-ST-ZIP **PALM BEACH GARDENS FL 33410**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **PD**
TAGGERT, KEVIN
 STREET ADDRESS **211 SOUTH HAMPTON DRIVE**
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE Change Addition
 NAME **TAGGERT**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
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 CITY-ST-ZIP

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TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

KEVIN TAGGERT PRESIDENT
 DIRECTOR

Date

Daytime Phone #

7/9/01 561-75-556

CR2E034 (5/01)

