

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90418 030 ***150.00

DOCUMENT # P00000081235

1. Entity Name

Genesis Design Studios, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1103 Cape Coral Pkwy., E.

Suite, Apt. #, etc.

Suite C

City & State

Cape Coral, Florida

3. Mailing Address

1103 Cape Coral Pkwy., E.

Suite, Apt. #, etc.

Suite C

City & State

Cape Coral, Florida

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1099071

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Charles J. D'Agostino

Street Address (P.O. Box Number is Not Acceptable)

1103 Cape Coral Pkwy., E., Suite C

City

Cape Coral

FL

Zip Code
33904

**DO NOT WRITE
IN THIS SPACE**

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

Charles J. D'Agostino

5-10-02

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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	D Smart, Carolyn 1103 Cape Coral Pkwy., E., Suite C Cape Coral, Florida 33904	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VanCleft, Jody 1103 Cape Coral Pkwy., E., Suite C Cape Coral, Florida 33904	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Smart, Gregory 1103 Cape Coral Pkwy., E., Suite C Cape Coral, Florida 33904	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Charles J. D'Agostino 1103 Cape Coral Pkwy., E., Suite C Cape Coral, Florida 33904	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles J. D'Agostino

May 10, 2002

Date

(239) 945-7888

Daytime Phone #

CR2E034B (12/01)