

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 01, 2001 8:00 am**  
**Secretary of State**

03-01-2001 90025 017 \*\*\*150.00

DOCUMENT # **P27709**

1. Entity Name  
**ANGE CONTRACTORS, INC.**

Principal Place of Business

**3145 GOLDENROD  
 SARASOTA FL 34239  
 US**

Mailing Address

**3145 GOLDENROD ST  
 SARASOTA FL 34239  
 US**

*SARASOTA, FLA.*

2. Principal Place of Business

3. Mailing Address  
*3145 GOLDENROD ST*

Suite, Apt. #, etc.  
*3145 GOLDEN ST.*

Suite, Apt. #, etc.

City & State  
*SARASOTA, FL.*

City & State  
*SARASOTA FL.*

4. FEI Number **98-0081973**

Applied For

Not Applicable

Zip  
*34239*

Country  
*SARASOTA*

Zip  
*34239*

Country  
*SARASOTA*

5. Certificate of Status Desired  
*DELETE*

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GUGLIELMO, ANGELO  
 3145 GOLDENROD  
 SARASOTA FL 34239**

Name  
*ANGELO GUGLIELMO*

Street Address (P.O. Box Number is Not Acceptable)  
*3145 GOLDENROD ST.*

*SARASOTA FL*

City  
 FL *34239*

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 *Angelo Guglielmo*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE *2-22-01*

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 \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PVS  
 GUGIELMO, ANGELO  
 323 BOLER ROAD  
 LONDON ONTARIO, CAN**  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**TD  
 GUGIELMO, ANGELO  
 323 BOLER ROAD  
 LONDON ONTARIO, CAN**  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Change  Addition

TITLE  
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 STREET ADDRESS  
 CITY-ST-ZIP  
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TITLE  
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 Change  Addition

TITLE  
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 CITY-ST-ZIP  
 Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Change  Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Change  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: *Angelo Guglielmo*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date *2-22-01* Daytime Phone # *941-922-6735*

CR20034 (10/00)