

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 26, 2000 8:00 am  
Secretary of State

01-26-2000 90028 009 \*\*\*150.00

DOCUMENT # P94000090386

1. Entity Name

ROLAND ACOSTA REAL ESTATE, INC.

Principal Place of Business

3428 CYPRESS STREET  
TAMPA FL 33607

Mailing Address

3428 CYPRESS STREET  
TAMPA FL 33603-2604

2. Principal Place of Business

4804 DARBY AVE

Suite, Apt. #, etc.

3. Mailing Address

4804 DARBY AVE

Suite, Apt. #, etc.

City & State

TAMPA FL 33603

City & State

TAMPA FL 33603

Zip

33603

Country

USA

Zip

33603

Country

USA

4. FEI Number

59-3298592

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ACOSTA, ROLAND  
3428 CYPRESS STREET  
TAMPA FL 33607

7. Name and Address of New Registered Agent

Name

NAOMI ACOSTA

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

4804 DARBY AVE

City

TAMPA FL 33603

City

FL

Zip Code

33603

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

Naomi Acosta

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-21-00

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, 2000 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

TITLE PVST ☒ Delete  
NAME ACOSTA, ROLAND  
STREET ADDRESS 3428 CYPRESS STREET  
CITY-ST-ZIP TAMPA FL 33607

TITLE D ☒ Delete  
NAME ACOSTA, ROLAND  
STREET ADDRESS 3428 CYPRESS STREET  
CITY-ST-ZIP TAMPA FL 33607

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAOMI ACOSTA ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 4804 DARBY AVE  
CITY-ST-ZIP TAMPA FL 33603

TITLE NAOMI ACOSTA ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 4804 DARBY AVE  
CITY-ST-ZIP TAMPA FL 33603

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

Naomi Acosta

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

NAOMI ACOSTA 1-21-00 (813) 870-3400