

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90158 020 ***158.75

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1. Entity Name

CHARLES TROTTA PHOTOGRAPHY, INC.

Principal Place of Business

1307 N 18TH ST.
TAMPA FL 33605

Mailing Address

PO BOX 320344
TAMPA FL 33679-2344

2. Principal Place of Business

4230 SOUTH MAC DILLANE

3. Mailing Address

PO BOX 320344

Suite, Apt. #, etc.

SUITE # 110

Suite, Apt. #, etc.

City & State

TAMPA, FLORIDA

City & State

Zip

33611

Country

USA

Zip

33679-2344

Country

4. FEI Number

59-3314260

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TROTTA, CHARLES
1307 N 18TH ST.
TAMPA FL 33679

7. Name and Address of New Registered Agent

Name

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

City

FL

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 W. Trotta

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 \$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

TITLE P
NAME TROTTA, CHARLES
STREET ADDRESS 3401 W. OBISPO ST.
CITY-ST-ZIP TAMPA FL 33629

TITLE V
NAME TROTTA, CHARLES M
STREET ADDRESS 3401 W OBISPA ST
CITY-ST-ZIP TAMPA FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
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:

Charles W. Trotta

CHARLES W. TROTTA

Date

Daytime Phone #

1/17/01 416-7208

CR2E034 (10/00)