

# 2000 UNIFORM BUSINESS REPORT (UBR)

0402568

DOCUMENT # 384693

1. Entity Name

VENTO OIL COMPANY

FILED

00 APR 27 PM 4: 32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2004 DURHAM ST  
BOX 5238  
TAMPA FL 33602-3601

2004 DURHAM ST  
BOX 5238  
TAMPA FLA 33605-6068

2. Principal Place of Business

1302 N. 19th Street

3. Mailing Address

1302 N. 19th Street

Suite, Apt. #, etc.

Suite 300

Suite, Apt. #, etc.

Suite 300

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33605

Country

USA

Zip

33605

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1358747

Applied For

Not Applicable

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

CAPITANO, JR. J  
2004 DURHAM STREET  
TAMPA FL 33605

Name

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

1302 N. 19th Street., Ste. 300

City

Tampa

FL

Zip Code

33605

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

4-24-00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V ☐ Delete  
NAME GARCIA, AL  
STREET ADDRESS 804 S. BRYAN RD.  
CITY-ST-ZIP BRANDON FL

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1302 N. 19th Street., Ste. 300  
CITY-ST-ZIP Tampa, FL 33605

TITLE TS ☐ Delete  
NAME CAPITANO, JOSEPH JR.  
STREET ADDRESS 2004 DURHAM STREET  
CITY-ST-ZIP TAMPA FL

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1302 N. 19th Street, Ste. 300  
CITY-ST-ZIP Tampa, FL 33605

TITLE PD ☐ Delete  
NAME CAPITANO, JOSEPH  
STREET ADDRESS 2004 DURHAM ST  
CITY-ST-ZIP TAMPA FL 33605

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1302 N. 19th Street., Ste. 300  
CITY-ST-ZIP Tampa, FL 33605

TITLE ATS ☐ Delete  
NAME CAPITANO, FRANK D  
STREET ADDRESS 2004 DURHAM ST  
CITY-ST-ZIP TAMPA FL 33605

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1302 N. 19th Street., Ste. 300  
CITY-ST-ZIP Tampa, FL 33605

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME 500003238935-0  
STREET ADDRESS -05/04/00--01007--023  
CITY-ST-ZIP \*\*\*\*\*158.75 \*\*\*\*\*158.75

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/00

(813)247-4731

CR2E034 (9/99)