

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 08, 2001 08:00 AM****Secretary of State****DOCUMENT # 736915**1. Entity Name
ARETE, INC.

Principal Place of Business

13717 N. 42ND ST.

#9

TAMPA

33613

FL

US

Mailing Address

13717 N. 42ND ST.

#9

TEMPLE TERRACE

33613

FL

US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2232461

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

ALLEY RICHARD H
502 S FREEMONT AVENUE # 224TAMPA FL
33606 USName
ALLEY RICHARD HStreet Address (P.O. Box Number is Not Acceptable)
14795 FEATHER COVE ROADCity FL Zip Code
CLEARWATER 33762

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 **RICHARD H. ALLEY****03/08/2001**

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

**FILE NOW:
FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	☐ Delete
NAME	COLORET ROBERT F	
STREET ADDRESS	410 S. MELVILLE AVE UNIT C	
CITY-ST-ZIP	TAMPA FL 33606	
TITLE	D	☐ Delete
NAME	WRIGHT ALBERT	
STREET ADDRESS	11347 REGAL SQ DR	
CITY-ST-ZIP	TAMPA FL 33617	
TITLE	DP	☐ Delete
NAME	LICHTENFELS DAVID D	
STREET ADDRESS	1113 N RIVERHILLS DR	
CITY-ST-ZIP	TAMPA FL 33617	
TITLE	STD	☐ Delete
NAME	BOOTS MICHAEL	
STREET ADDRESS	4618 LANDSCAPE DR	
CITY-ST-ZIP	TAMPA FL 33624	
TITLE	VD	☐ Delete
NAME	JANSON REX	
STREET ADDRESS	1015 PINE RIDGE CR	
CITY-ST-ZIP	BRANDON FL 33511	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	SD	☒ Change ☐ Addition
NAME	MIKE SHOWALTER	
STREET ADDRESS	615 W. HORATIO ST #7	
CITY-ST-ZIP	TAMPA FL 33606	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	☒ Change ☐ Addition
NAME	RICHARD ALLEY	
STREET ADDRESS	14795 FEATHER COVE ROAD	
CITY-ST-ZIP	CLEARWATER FL 33762	
TITLE	VD	☒ Change ☐ Addition
NAME	DAN SCHINSKY	
STREET ADDRESS	5409 TERRAIN DE GOLF DRIVE	
CITY-ST-ZIP	TAMPA FL 33549	
TITLE	PD	☒ Change ☐ Addition
NAME	ROBERT COLORET F	
STREET ADDRESS	502 S. FREMONT AVENUE #230	
CITY-ST-ZIP	TAMPA FL 33606	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard H. Alley

TD

03/08/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/00)