FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Feb 06, 2002 8:00 am **DOCUMENT # 761802 Secretary of State** PARK EAST OF PINELLAS PARK, INC. 02-06-2002 90039 003 ****61.25 Principal Place of Business Mailing Address 5117 70TH PLACE N. 5650 PARK BLVD PINELLAS PARK FL 33781 SUITE 1 PINELLAS PARK FL 33781 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59-2445190 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FRED H HALE Street Address (P.O. Box Number is Not Acceptable) 5650 PARK BLVD STE 1 PINELLAS PARK FL 33781 City Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (10/6) Change PD TITLE ☐ Delete TITLE CARINI. ANDREW NAME NAME CARINI, ANDREW 5115 70TH PLACE N STREET ADDRESS STREET ADDRESS 5115 70TH PLACE N. PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-7IP <u>PINELLAS PARK, FL. 33781</u> PD Change ☐ Delete TITLE ■ Addition TITLE VALDEZ, DENA NAME NAME VALDEZ, DENA 5030 70TH PLACE N STREET ADDRESS STREET ADDRESS 5030 70TH PLACE N. PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-ZIP PINELLAS PARK, FL 33781 SD Delete TITLE ☐ Change Addition TITLE WITKO, SHARON NAME NAME WITKO, SHARON **5047 70TH PLACE N** STREET ADDRESS STREET ADDRESS 5047 70TH PLACE N PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-ZIP PINELLAS PARK, FL 33781 Change TITLE ☐ Delete TITLE ☐ Addition THOMAS, FLORENCE NAME NAME THOMAS, FLORENCE 5015 70TH PL N STREET ADDRESS STREET ADDRESS 5015 70TH PLACE N PINELLAS PARK FL 33781 CITY-ST-ZIP CITY-ST-ZIP PINELLAS PARK, FL 33781 Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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)(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 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 impowered.

SIGNATURE:

ANDREW J. CARINI