2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

01-21-2003 90600 013 ***150.00
FILF02000000812
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JAN 22 AM 11:03

DOCUMENT # F02000000812

1. Entity Name
GIOFFRE COMPANIES, INC

Principal Place of Business	Mailing Address
5126 BLAZER PKWY DUBLIN OH 43017	5126 BLAZER PKWY DUBLIN OH 43017

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
6262 EITERMAN RD	6262 EITERMAN RD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: DUBLIN, OH	City & State: DUBLIN, OH
Zip: 43016 Country: USA	Zip: 43016 Country: USA

4. FEI Number 31-1683747 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CYRUS SR, DAVID L
19505 S.W. 272 STREET
HOMESTEAD FL 33021

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: John Gioffre V.P. (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)
DATE 1-15-03

FILE NOW!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GIOFFRE, ANTHONY 5126 BLAZER PKWY DUBLIN OH ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition P GIOFFRE, ANTHONY 6262 EITERMAN RD DUBLIN, OH 43016
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VT GIOFFRE, JOHN 5126 BLAZER PKWY DUBLIN OH ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition VT GIOFFRE JOHN 6262 EITERMAN RD DUBLIN, OH 43016
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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 607, 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: SIGNATURE REQUIRED V.P. (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)
Date 1-15-03 Daytime Phone # (614) 764-0032

John Gioffre V.P.

2/4/03 ad

CR2E034 (10/02)