


2003 **FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90121 005 ***150.00

DOCUMENT # F99000002461
1. Entity Name
Realty Investment Corp. ✓ 

DO NOT WRITE IN THIS SPACE

10054646

2. Principal Place of Business 447 3 rd Ave No		3. Mailing Address 447 3 rd Ave No	
Suite, Apt. #, etc. Suite 409		Suite, Apt. #, etc. Suite 409	
City & State St. Petersburg, FL		City & State St. Petersburg, FL	
Zip 33701	Country PINELLAS	Zip 33701	Country PINELLAS

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number 22-2782174		Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
	Name Robert Gonzalez Street Address (P.O. Box Number is Not Acceptable) 2575 67 th Ave So City St. Petersburg FL Zip Code 33712		

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PV Robert Gonzalez 2575 67 th Ave So St. Petersburg, FL 33712	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Dorothy Gonzalez 2575 67 th Ave So St. Petersburg, FL 33712	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Dorothy Gonzalez Dorothy Gonzalez 3/31/03 727 553-9505
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)