

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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FILED

02 JUN 24 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G 92792

1. Entity Name

ITALIAN Solid Gold, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4628 Forest Hill Blvd

3. Mailing Address

4628 Forest Hill Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

West Palm Bch. Fla.

City & State

West Palm Bch. Fla.

4. FEI Number

59-235-6041

Applied For

Not Applicable

Zip

33415

Country

P.B. Co.

Zip

33415

Country

P.B. Co.

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Evie Bedner Houston

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

4628 Forest Hill Blvd

West Palm Bch.

City

FL

Zip Code

33415

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

Evie Houston, EVIE HOUSTON, Evie Houston, Pres. 6-20-02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1, Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

Pres.
Evie Houston
4628 Forest Hill Blvd
West Palm Bch Fla 33415

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

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NAME

STREET ADDRESS

CITY - ST - ZIP

DO NOT WRITE
IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Evie Houston, EVIE HOUSTON,

5-25-02

5614331338

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR200348 (12/01)