

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90123 003 ***150.00

0101625 AV

DOCUMENT # J13357

1. Entity Name

LOGOGRAM, INC.

Principal Place of Business

6831 EDGEWATER COMMERCE PKWY
 SUITE 1101
 ORLANDO FL 32810
 US

Mailing Address

6831 EDGEWATER COMMERCE PKWY
 SUITE 1101
 ORLANDO FL 32810
 US

129498



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

600 TECHNOLOGY PK. DR.
 SUITE, Apt. #, etc.
 #108

3. Mailing Address

600 TECHNOLOGY PK. DR.
 SUITE, Apt. #, etc.
 #108

City & State

LAKE MARY, FL
 Zip 32746 Country USA

City & State

LAKE MARY, FL
 Zip 32746 Country USA

4. FEI Number

59-2673252

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PUPO, ANTHONY J
 6831 EDGEWATER COMMERCE PKWY
 SUITE 1101
 ORLANDO FL 32789

7. Name and Address of New Registered Agent

Name PUPO, ANTHONY J.
 Street Address (P.O. Box Number is Not Acceptable)
 600 TECHNOLOGY PARK DR.
 #108
 City LAKE MARY FL Zip Code 32746

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

[Signature] ANTHONY J. PUPO Pres. 1/21/02

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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	VP	<input type="checkbox"/> Delete
NAME	PUPO, TAMELA M	
STREET ADDRESS	1531 PLACE PICANDY	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	PUPO, ANTHONY J.	
STREET ADDRESS	1531 PLACE PICANDY	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	PUPO, ANTHONY J.	
STREET ADDRESS	1531 PLACE PICANDY	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	600 TECHNOLOGY PARK DR. #108
CITY-ST-ZIP	LAKE MARY, FL 32746
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	600 TECHNOLOGY PARK DR. #108
CITY-ST-ZIP	LAKE MARY, FL 32746
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/02

Date

407 445 9977

Daytime Phone #

CR2E034 (9/01)