.2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J54295

Entity Name

Villa Palma Incorporated

FILED
May 03, 2000 8:00 am
Secretary of State
05-03-2000 90141 001 ***300.00

[redacted]

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
MARINA ISLE BLVD HARBOR FL 32937	41 MARINA ISLE BLVD INDIAN HARBOR FL 32903-4728

2. Principal Place of Business	3. Mailing Address
596 Veracruz Blvd.	596 Veracruz Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Indialantic, Fla.	City & State: Indialantic, Fla.
Zip: 32903 Country: Brevard	Zip: 32903 Country: Brevard

4. FEI Number 59-2773687 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MAZZELLA, MELINDA
41 MARINA ISLE BLVD
INDIAN HARBOR FL 32937

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable) 596 Veracruz Blvd.

City Indialantic FL Zip Code 32903

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 Melinda Mazzella

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) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MAZZELLA, MELINDA	NAME	
STREET ADDRESS	41 MARINA ISLE BLVD	STREET ADDRESS	596 Veracruz Blvd.
CITY-ST-ZIP	INDIAN HARBOR FL 32937	CITY-ST-ZIP	Indialantic, Fla. 32903
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MAZZELLA, GIUSEPPE	NAME	
STREET ADDRESS	41 MARINA ISLE BLVD	STREET ADDRESS	596 Veracruz Blvd.
CITY-ST-ZIP	INDIAN HARBOR FL 32937	CITY-ST-ZIP	Indialantic, Fla. 32903
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E031 (9/99)

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: Melinda Mazzella Melinda Mazzella 4/17/2000 321-777-8001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Melinda Mazzella