2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2003 8:00 am
Secretary of State
07-10-2003 90108 027 ***150.00

004200 AV

DOCUMENT # K03397

1. Entity Name
BONELLI ROADRUCK ASSOCIATES, INC.

Principal Place of Business	Mailing Address
% CHRISTINA BONELLI 1301 N VENETIAN WAY SAN MARCO ISLAND FL 33139	% CHRISTINA BONELLI 1301 N VENETIAN WAY SAN MARCO ISLAND FL 33139

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0010664 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BONELLI, CHRISTINA 1301 N VENETIAN WAY SAN MARCO ISLAND FL 33139	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 ______ Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE ______

FILE NOW!!! FEE IS $550.00
After September 10, 2003 Fee will be $750.00
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	D BONELLI, CHRISTINA 1301 N. VENETIAN WAY MIAMI FL ☐ 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
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CR2E034 (4/03)

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: Christina Bonelli 7-7-03 305-358-2662
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
90141269

July 7, 2003

Florida Department of State
Division of Corporations

To whom it may concern:

On Saturday July 5, 2003 I received a Uniform Bus. Report request to file now for $550.00. I filed a report with the Dept of State for $50.00 in January check # 1699. I believe it was for a fictitious name.

The point being if I didn't file the UBR, it was because I didn't get the renewal package to begin with. I am very organized. I have paid this fee on time for 15 years. It is not in my to be paid tray. I do not believe I received it or it would have been paid. My document # K03397.

Today I e-mailed this information to corphelp@mail.dos.state.fl.us and they advised me to send this letter along with my $150.00 fee. Please find this check enclosed. Thank you for your anticipated understanding.

Sincerely,

Christina Bonelli

Christina Bonelli