

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2003 8:00 am
Secretary of State

09-10-2003 90060 030 ***150.00

0139202 AT

DOCUMENT # K35780

1. Entity Name
PRUTOS PUBLIC RELATIONS, INC.



Principal Place of Business
~~3395 PARK CENTRAL CT.~~
NAPLES FL 34109
US

Mailing Address
P O BOX 43
NAPLES FL 33939-043
US



2. Principal Place of Business

1868 Verona Ct

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples FL

City & State

4. FEI Number **65-0076101**

Applied For
Not Applicable

Zip **34109** Country **Collier**

Zip Country

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

6. Name and Address of Current Registered Agent

PRUTOS, KATHLEEN
1868 VERONA CT.
NAPLES FL 34109

7. Name and Address of New Registered Agent

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

Kathleen G. Prutos

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 **PO** ☐ Delete
NAME **PRUTOS, KATHLEEN**
STREET ADDRESS ~~**6035 PARK CENTRAL CT.**~~
CITY-ST-ZIP **NAPLES FL**

TITLE ☒ Change ☐ Addition
NAME **1868 Verona Ct**
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **PRUTOS, DEAN**
STREET ADDRESS ~~**5395 PARK CENTRAL CT.**~~
CITY-ST-ZIP **NAPLES FL**

TITLE ☐ Change ☐ Addition
NAME **1868 Verona Ct**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Kathleen G. Prutos 9/1/03 (239) 572-3783
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date Daytime Phone #

CR2E034 (4/03)

attachment

801410171
#K35780

PRUTOS
PUBLIC RELATIONS, INC
ADVERTISING & MARKETING
September 5, 2003

Department of State Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

Enclosed is our corporate check #1269 in the amount of \$150 to cover the uniform business report (UBR) fee for our corporation.

I ask that you please waived the late fee as we did not receive any prior notice. As you can see from our records, we have been a Florida corporation since 1988 and have NEVER been late filing our fees.

Thank you for your consideration. If needed, please call me at (239 572-3783.

Cordially,

Kathleen G. Prutos
President

KGP;jlh
Attachments 2