

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K45917

1. Entity Name

MICHELANGELO, INC.

Principal Place of Business

Mailing Address

518 INDUSTRIAL AVE
14 & 15
BOYNTON BEACH FL 33435

518 INDUSTRIAL AVE
14 & 15
BOYNTON BEACH FL 33426-3645

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0113215

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

BIZZOTTO, FIDENZIO
2901 COMMERCE PARK DR.
BOYNTON BEACH FL 33435

Name BIZZOTTO FIDENZIO
Street Address (P.O. Box Number is Not Acceptable)
518 INDUSTRIAL AVE, BAY 14 & 15
City BOYNTON BEACH FL Zip Code 33435

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

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

FIDENZIO BIZZOTTO

4-25-00
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
NAME BIZZOTTO, FIDENZIO
STREET ADDRESS 518 INDUSTRIAL AVE., BAY 14 & 15
CITY-ST-ZIP BOYNTON BEACH FL 33435

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

TITLE D ☐ Delete
NAME BIZZOTTO, GRAZIA
STREET ADDRESS 518 INDUSTRIAL AVE., BAY 14 & 15
CITY-ST-ZIP BOYNTON BEACH FL 33435

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Fidenzio Bizzotto
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FIDENZIO BIZZOTTO

Date

Daytime Phone #

FILED

May 07, 2000 8:00 am
Secretary of State

05-07-2000 90008 001 ***150.00



DO NOT WRITE IN THIS SPACE