

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 02, 2003 8:00 am
Secretary of State

06-02-2003 90191 049 ***550.00

DOCUMENT # **K51464**

1. Entity Name

COROSO, INC.



DO NOT WRITE IN THIS SPACE

90138451

2. Principal Place of Business

FLOR WOOD

Suite, Apt. #, etc.

3. Mailing Address

3267 ELLWOOD CT

Suite, Apt. #, etc.

City & State

SANFORD, FL

City & State

WINTER PARK, FL

Zip

32773

Country

SEMINOLE

Zip

32792

Country

SEMINOLE

4. FEI Number

59-2924939

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

CURTIS R SMITH

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

3267 ELLWOOD CT

City

WINTER PARK

FL

Zip Code

32792

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**OWNER
CURTIS R. SMITH
WINTER PARK, FL 32792
3267 ELLWOOD CT**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Curtis R. Smith CURTIS R SMITH

5/30/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)