

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 08, 2002 8:00 am**  
**Secretary of State**

07-08-2002 90229 029 \*\*\*150.00

**DOCUMENT # K75221**

1. Entity Name  
**OFF LIMITS, INC.**

Principal Place of Business  
**639 CLEVELAND ST., SUITE 310  
CLEARWATER FL 33755  
US**

Mailing Address  
**639 CLEVELAND ST., SUITE 310  
CLEARWATER FL 33755  
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2957307**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

**CASSANO, RAY  
639 CLEVELAND ST.  
SUITE 310  
CLEARWATER FL 33755**

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

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 \$550.00  
After September 13, 2002 Fee will be \$750.00  
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 ☐ Delete  
NAME **DP**  
STREET ADDRESS **CASSANO, RAY**  
CITY-ST-ZIP **639 CLEVELAND ST.,STE310  
CLEARWATER FL**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

**SIGNATURE REQUIRED**

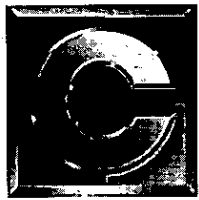
*Raymond Cassano*

Date

Daytime Phone #

**27-429-1995**

CR2E034 (4/02)



**RAY  
CASSANO**  
ENTERPRISES

*Attachment  
# K75221  
119219*

Dear UBR,

1 July 2002

In Jan 2002 I used your new internet to pay my UBRs.

Tone 40 LTD.

Ray & Kim Cassano Inc.

HobbyRat.com Inc.

Off Limits Inc. *→ Delinquent*

I must have got confused because today I received a delinquent notice. I called and the lady told me to pay \$150.00 and write you a letter. Please don't charge me a late fee as I was very early and I must have hit the wrong button. Enclosed is a form I thought was the confirmation but it wasn't.

Thank You

*Ray Cassano*  
Ray Cassano

