

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90441 032 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K95334

1. Entity Name

Victor J. Latavish, Architect, P.A.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4100 Corporate Square

Suite, Apt. #, etc.

Suite 100

City & State

Naples, FL

Zip
33942

Country
US

3. Mailing Address

2375 Tamiami Trail

Suite, Apt. #, etc.

Suite 302

City & State

Naples, FL

Zip
34101

Country
US

4. FEI Number

650126127

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Latavish, Victor J.

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

4100 Corporate Square Suite 100

City

Naples, FL

FL

Zip Code

34104

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

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1: Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
P. Latavish, Victor J.
STREET ADDRESS
4100 Corporate Square Ste 100
CITY-ST-ZIP
Naples, FL 34104

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**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE: *Victor J. Latavish*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 29 2002

239-659-0000

Date

Daytime Phone #

CR2E034B (12/01)