

FOR PROFIT CORPORATION
2002 UNIFORM BUSINESS REPORT (UBR)

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

05-27-2002 90444 014 ***150.00

DOCUMENT # L56893

1. Entity Name

Free Spool Sportfishing Charters, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

C/o Dennis Forgione

3. Mailing Address

C/o Dennis Forgione

Suite, Apt. #, etc.

16416 N.E. 26 Avenue

Suite, Apt. #, etc.

16416 N.E. 26 Avenue

City & State

No. Miami Beach, FL

City & State

No. Miami Beach, FL

Zip

33160

Country

USA

Zip

33160

Country

USA

4. FEI Number

65-0245594

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Dennis Forgione

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

16416 N.E. 26 Avenue

City

North Miami Beach

FL

Zip Code

33160

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
STREET ADDRESS
CITY-ST-ZIP
P/D
Dennis Forgione
16416 N.E. 26 Avenue
No. Miami Beach, FL 33160

TITLE
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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: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dennis Forgione

Date

✓ 4/26/02

Daytime Phone #

✓ 305 947-8844

CR2E034B (12/01)