

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90414 016 ***158.75

DOCUMENT # M09500
 1. Entity Name
ARMELLINI INDUSTRIES, INC.

Principal Place of Business Mailing Address
3446 SW ARMELLINI AVE **3446 SW ARMELLINI AVE**
P.O BOX 678 **P.O BOX 678**
PALM CITY FL 34990 **PALM CITY FL 34990**



DO NOT WRITE IN THIS SPACE

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 **59-2492304** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
NICHOLASON, JOHN J.
3446 SW ARMELLINI AVE.
PALM CITY FL 34990

7. Name and Address of New Registered Agent
 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.
 SIGNATURE: *[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.
FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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

TITLE	CD	<input type="checkbox"/> Delete
NAME	ARMELLINI, JULIO	
STREET ADDRESS	541 S.W. FALCON ST.	
CITY-ST-ZIP	PALM CITY FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ARMELLINI, SARAH	
STREET ADDRESS	541 S.W. FALCON ST.	
CITY-ST-ZIP	PALM CITY FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	ARMELLINI, RICHARD	
STREET ADDRESS	2453 PROVENCE CIRCLE	
CITY-ST-ZIP	WESTON FL 33327	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ARMELLINI, DAVID	
STREET ADDRESS	2905 SW GULL HARBOR LAND	
CITY-ST-ZIP	PALM CITY FL 34990	
TITLE	STD	<input type="checkbox"/> Delete
NAME	NICHOLASON, JOHN J.	
STREET ADDRESS	1149 SW HOGAN ST	
CITY-ST-ZIP	PT ST LUCIE FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ARMELLINI, STEPHEN	
STREET ADDRESS	6820 APPALOOSA TRAIL	
CITY-ST-ZIP	FT LAUDERDALE FL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	COO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MERRITT, JAMES T.	
STREET ADDRESS	10410 S. OCEAN DRIVE, #1007	
CITY-ST-ZIP	JENSEN BEACH, FL 34957	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DRURY, JEFFREY	
STREET ADDRESS	1658 S.E. GAINSWOOD	
CITY-ST-ZIP	PORT ST. LUCIE, FL 34957	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DUSHARM, JUDITH	
STREET ADDRESS	1230 SW DYER POINT ROAD	
CITY-ST-ZIP	PALM CITY, FL 34990	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ARMELLINI, STEPHEN	
STREET ADDRESS	10510 PARIS STREET	
CITY-ST-ZIP	COOPER CITY, FL 33026	

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]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone
JUDITH E. DUSHARM, VD 4-12-02 772-287-0575 81851

CR2E034 (9/01)