

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

May 09, 2002 8:00 am
Secretary of State

05-09-2002 90048 004 ****61.25

DOCUMENT # N35927

1. Entity Name

PORTUGUESE/AMERICAN CLUB OF PALM COAST INC.

Principal Place of Business

Mailing Address

25 OLD KINGS ROAD NORTH
SUITE 8-A
PALM COAST FL 32137

P.O. BOX 354250
PALM COAST FL 32135-4250

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

59-3078703

Applied For

Not Applicable

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

COSTA, GEORGE M
98 FLORIDA PARK DRIVE
PALM COAST FL 32137

Name

ANTONIO AMARAL

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

9 CONTWOOD LANE

City

PALM COAST FL.

FL

Zip Code

32137

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

Antonio Amaral

PRESIDENT DIRECTOR

4-6-2002

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME CUSTA, GEORGE ☒ Delete
STREET ADDRESS 98 FLORIDA PARK DRIVE
CITY-ST-ZIP PALM COAST FL 32137

TITLE
NAME ANTONIO AMARAL ☒ Change ☐ Addition
STREET ADDRESS 9 CONTWOOD LANE
CITY-ST-ZIP PALM COAST FL 32137

TITLE VPD
NAME DA CONCEIAS, GEORGE ☒ Delete
STREET ADDRESS 39 COCONUT CENTER
CITY-ST-ZIP PALM COAST FL 32137

TITLE
NAME FERNANDO ARRAIAL ☒ Change ☐ Addition
STREET ADDRESS 27 PRINCETON LANE
CITY-ST-ZIP PALM COAST

TITLE TD
NAME CABRAL, LAURO ☒ Delete
STREET ADDRESS 10 WALLSTONE PLACE
CITY-ST-ZIP PALM COAST FL 32164

TITLE
NAME ERNESTO ABREU ☒ Change ☐ Addition
STREET ADDRESS 12 PROVIDENCE LANE
CITY-ST-ZIP PALM COAST

TITLE SD
NAME BARBOSA, MARIA ☒ Delete
STREET ADDRESS 45B BRITTANY LANE
CITY-ST-ZIP PALM COAST FL 32137

TITLE
NAME HELEN VIEGAS ☒ Change ☐ Addition
STREET ADDRESS 64 WINDYBROOK DR.
CITY-ST-ZIP PALM COAST FL

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Antonio Amaral*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANTONIO AMARAL 4-24-2002

Date

Daytime Phone #

CR2E037 (9/01)