2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000000131

FILED
Feb 16, 2000 8:00 am
Secretary of State
02-16-2000 90021 012 ****61.25

1. Entity Name

TAMPA BAY VETTES INC.

Principal Place of Business	Mailing Address
C/O SHIRLEY GORGEI 1002 S. HARBOUR ISLE BLVD., BLDG. C1 #1403 TAMPA FL 33602 US	C/O BRUNO, FRANCIS P.O BOX 130682 TAMPA FL 33681-0882 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
Zip / Country	Zip / Country

4. FEI Number 59-2041417 ☐ 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
GORGEI, SHIRLEY 1002 SOUTH HARBOUR ISLE BLVD. BLDG. C1, #1403 TAMPA FL 33602	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 Shirley Gorgei 1-27-00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GORGEI, SHIRLEY 1002 S. HARBOUR ISLE BLVD. 1403 TAMPA FL 33602	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CARBONE, PATRICK 7575 GRAN KAYMEN WAY VALRICO FL 33594	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition VP Lazzaro, Al 4601 Grandview Ct C-101 Tampa, FL 33609
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CHEVILLOT, PETER 7575 GRAN KAYMEN WAY APOLLO BEACH FL 33572	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition TD Hunter, Irene 508 Severn Ave Tampa, FL 33606
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CHEVILLOT, ANNE 7575 GRAN KAYMEN WAY APOLLO BEACH FL 33572	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition SD Johnson, Carol 29350 Downy Place Wesley Chapel 33544
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

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: Shirley Gorgei 1-27-00 813-221-3401
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #