2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002
Secretary of State

DOCUMENT# N98000006914

Entity Name: THE ITALIAN AMERICAN CLUB OF TAMARAC, INC.

Current Principal Place of Business:

7166 N. UNIVERSITY
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

7166 N. UNIVERSITY
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 65-0911514 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE, FL 333114132 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MELA, ANGELO
Address: 7166 N. UNIVERSITY DR.
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: CIRMINELLO, WILLIAM
Address: 7166 N. UNIVERSITY DR.
City-St-Zip: TAMARAC, FL 33321

Title: PD ( ) Delete
Name: SANTAPRIA, LOUIS
Address: 7166 N. UNIVERSITY DR.
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MENDEZ, MARANGELLY
Address: 7166 N. UNIVERSITY DR.
City-St-Zip: TAMARAC, FL 33321

Title: D (X) Change ( ) Addition
Name: BLANCHARD, JOHN
Address: 7166 N. UNIVERSITY DR.
City-St-Zip: TAMARAC, FL 33321

Title: PD (X) Change ( ) Addition
Name: ABBATE, DENNIS
Address: 7166 N. UNIVERSITY DR.
City-St-Zip: TAMARAC, FL 33321

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS ABBATE PD 07/16/2002

Electronic Signature of Signing Officer or Director — Date