


FILED
Aug 07, 2003 8:00 am
Secretary of State

08-07-2003 90119 001 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000028708			
1. Entity Name ROSALIE GUARIO SILVESTRI, P.A.			
Principal Place of Business 1656 SW 109TH TERRACE DAVIE, FL 33324		Mailing Address 1656 SW 109TH TERRACE DAVIE, FL 33324	
2. Principal Place of Business 976 N. University Dr Suite, Apt. #, etc.		3. Mailing Address 4171 S.W. 135th Avenue Suite, Apt. #, etc.	
City & State Coral Springs, Florida		City & State Davie, Florida	
Zip 33071		Zip 33330	
Country U.S.A.		Country U.S.A.	
4. FEI Number 65-0997679		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TRONCONE, MONIQUE CPA 499 E PALMETTO PARK RD 207 BOCA RATON, FL 33432		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		FL	
Zip Code		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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____			
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when appointing)</small>			
<small>FILED AUG 07 2003 BY MISS JESSICA BOGGS</small> <small>RECORDS SECTION</small> <small>STATE SECRETARY OF STATE</small> <small>TALLAHASSEE, FLORIDA</small>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD SILVESTRI, ROSALIE GUARIO <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1656 SW 109TH TERRACE	NAME	
STREET ADDRESS	DAVIE, FL 33324	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	VP SILVESTRI, MIKE <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1656 SW 109TH TERRACE	NAME	
STREET ADDRESS	DAVIE, FL 33324	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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 807, 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: <i>R Silvestri</i>		08/04/03	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

CH2EC04 (10/02)

Attachment

ROSALIE GUARIO SILVESTRI OD P.A.
4171 SW 135TH AVENUE
DAVIE, FL 33330
Telephone (954)-346-5208

86136297
P00000028708

July 25, 2003

Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314-6327

Dear Sir or Madam:

Please be advised that we had never received the Uniform Business Report. We were incorporated on March 21st, 2000 and I believe I should be paying \$150.00 per year to keep the corporation active.

Please make sure you update your records and start sending me the annual reports to the following address:

4171 SW 135TH AVENUE
DAVIE, FL 33330

If there are any fees to reinstate the corporation we are requesting with all your respect an abatement of this penalty since we did not received the annual report.

We appreciate your cooperation

Sincerely,


Rosalie Guario Silvestri