FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State
03-13-2002 90107 039 ***150.00

DOCUMENT # P00000032784

1. Entity Name
VITATO AND LESLIE CONSTRUCTION Comp

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1277 Whitfield Ave	1277 Whitfield Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
SARASOTA, FL	SARASOTA, FL
Zip 34243 Country US	Zip 34243 Country US

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1003460 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: RICHARD H LESLIE
Street Address (P.O. Box Number is Not Acceptable): 1277 Whitfield Ave
City: SARASOTA FL Zip Code: 34243

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: Richard H Leslie 2/20/02
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. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	PRESIDENT, S,T
NAME	BEATRICE S. LESLIE
STREET ADDRESS	1277 WHITFIELD AVE
CITY-ST-ZIP	SARASOTA FL 34243
TITLE	VICE PRESIDENT
NAME	GLENN DOUGLAS VITATO
STREET ADDRESS	1809 25th AVE W
CITY-ST-ZIP	BRADENTON, FL 34205

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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Beatrice Leslie 2/20/02 941-351-8288
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #