## **FILED** Apr 24, 2002 8:00 am Secretary of State

04-24-2002 90316 035 \*\*\*150.00

## 2002 UNIFORM BUSINESS REPORT (UBR)

P00000037097

1. Entity Name

ANTHONY DEVINCENTIS, INC.

Principal Place of Business 2103 NE 56TH COURT

DOCUMENT #

Mailing Address

2103 NE 56TH COURT

FT. LAUDERDALE FL 33308		FT. LAUDERDALE FL 33308								
		·								
2. Principal Place of Business .			3. Mailing Address				1 18814001 411 48111 00141 00411 00111	<b>       </b>	:1 (8 <b>8</b> 1) 8 <b>9</b> 1(8)	]    [BB : 198
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State			City & State		· · · · · · · · · · · · · · · · · · ·	4. F	65-1000057			plied For t Applicable
Zip		Country	Zip	Coun	try	5. (	Certificate of Status Desired		8.75 Add	itional
	6. Name	and Address of Current Re	gistered Agent			7. N	lame and Address of New Re			
					Name					
DEVINCENTIS, ANTHONY										
	56TH COUR		Sti		Street Address	eet Address (P.O. Box Number is Not Acceptable)				
FI. LAUDI	erdale fl	33300								
					City		<u></u>	FL	Zip Code	,
8. The above	named entity	submits this statement for the	ne purpose of changing its	registere	ed office or registe	ered ag	ent, or both, in the State of Flor	ida.		
										j
SIGNATURE .							•			
	Signature, typed o	or printed name of registered agent and	title if applicable. (NOTE	: Registered	d Agent signature require	ed when re	einstating)	DATE		
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FE					IS \$150.00					
Tax filing requirement and elects to do so.			After May 1, 2002 Fee will be \$				<ol> <li>Election Campaign Fina Trust Fund Contribution</li> </ol>			May Be to Fees
(See criter	ria on back)		Make Check Payab			ate	Trust Fund Continbution		Added	to rees
11.		OFFICERS AND DII	I RECTORS	12.	· · · · · · · · · · · · · · · · · · ·	AD	I DITIONS/CHANGES TO OFFIC	CERS AND D	RECTORS	IN 11
TITLE	VT		☐ Delete	TITLE					Change	Addition
NAME		TS, GINANNA	<u> </u>	NAM	II			_		
STREET ADDRESS 2103 NE 56TH COURT					ET ADDRESS					
CITY-ST-ZIP		DERDALE FL 33308		CITY-	-ST-ZIP					
TITLE			☐ Delete	TITLE						Addition
NAME								Г	□ Change	
STREET ADDRESS				4		,		. [	Change	L. Addition
	i	•		NAM	E			. [	☐ Change	Addition
UII 1-51-ZIP		•		nami Stre	E ET ADDRESS	,		. [	_ Change	Adultion
CITY-ST-ZIP				NAMI STRE CITY-	E ET ADDRESS -ST-ZIP				_ `	
TITLE			☐ Delete	NAMI STRE CITY- TITLE	E ET ADDRESS - ST-ZIP				Change Change	Addition
TITLE NAME				NAMI STRE CITY- TITLE NAME	E ET ADDRESS ST-ZIP				_ `	
TITLE NAME STREET ADDRESS				NAMI STRE CITY- TITLE NAME STRE	E ET ADDRESS -ST-ZIP E E ET ADDRESS				_ `	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	NAME STRE CITY- TITLE NAME STRE CITY-	E ET ADDRESS -ST-ZIP E E E ADDRESS -ST-ZIP			. [	□ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				NAME STRE CITY- TITLE NAME STRE CITY-	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP			. [	_ `	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			☐ Delete	NAMM STRE CITY- TITLE NAMM STRE CITY- TITLE	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E			. [	□ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			☐ Delete	NAME STRE CITY- TITLE NAME STRE CITY- TITLE NAME STRE	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP			. [	□ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	NAME STRE CITY- TITLE NAME STRE CITY- TITLE NAME STRE CITY-	E ET ADDRESS -ST-ZIP  E ET ADDRESS -SI-ZIP  E ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			☐ Delete	NAME STRE CITY- TITLE NAME STRE CITY- TITLE NAME STREE CITY- TITLE TITLE TITLE TITLE TITLE	E ET ADDRESS -ST-ZIP  E ET ADDRESS -SI-ZIP  E E ST-ZIP				□ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME			☐ Delete	NAME STRE CITY- TITLE NAME STRE CITY- TITLE NAME STRE CITY- TITLE NAME NAME	E ET ADDRESS -ST-ZIP  E ET ADDRESS -SI-ZIP  E ET ADDRESS -SI-ZIP  E ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			☐ Delete	NAMI STRE CITY- TITLE NAME STRE CITY- TITLE NAME STREE CITY- TITLE NAME STREE	E ET ADDRESS -ST-ZIP  E ET ADDRESS -SI-ZIP  E E ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete Delete	NAMM STRE CITY- TITLE NAMM STRE CITY- TITLE NAMM STREE CITY- TITLE NAMM STREE CITY-	E ET ADDRESS -ST-ZIP E E E			·	☐ Change ☐ Change	Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS			☐ Delete	NAMI STRE CITY- TITLE NAME STRE CITY- TITLE NAME STREE CITY- TITLE NAME STREE	E ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP			·	☐ Change	☐ Addition

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information inclicated 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 Block 12 if changed, or on an attachment with an address with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP