

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2002 8:00 am
Secretary of State

02-10-2002 90030 032 ***158.75

DOCUMENT # P00000040073

1. Entity Name
MEDIWORXX, INC.

Principal Place of Business

1819 MAIN ST. 11TH FL
SARASOTA FL 34236

Mailing Address

1819 MAIN ST. 11TH FL
SARASOTA FL 34236

2. Principal Place of Business

2065 Cantu Court
 Suite, Apt. #, etc.

3. Mailing Address

2065 Cantu Court
 Suite, Apt. #, etc.

City & State
Sarasota, FL

Zip
34232

Country
USA

City & State
Sarasota, FL

Zip
34232

Country
USA

4. FEI Number **65-1009858**

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MASTROPIETRO, DONALD R
1819 MAIN ST. 11TH FL
SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name **Donald R. Mastropietro**

Street Address (P.O. Box Number is Not Acceptable)

2065 Cantu Court

City **Sarasota**

FL

Zip Code **34232**

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 **Donald R. Mastropietro** **Donald R. Mastropietro** **1/8/02**
 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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE **CDP** ☐ Delete
NAME **ROGERS, PATRICIA**
STREET ADDRESS **1819 MAIN STREET 11TH FLOOR**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **DV** ☐ Delete
NAME **JONAS, MICHAEL**
STREET ADDRESS **1819 MAIN STREET 11TH FLOOR**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **DVT** ☐ Delete
NAME **FLOYD, CHRISTOPHER**
STREET ADDRESS **1819 MAIN STREET 11TH FLOOR**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **V** ☐ Delete
NAME **DERINGER, GREGORY**
STREET ADDRESS **1819 MAIN STREET 11TH FLOOR**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **S** ☐ Delete
NAME **MASTROPIETRO, DONALD**
STREET ADDRESS **1819 MAIN STREET 11TH FLOOR**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2065 Cantu Court**
CITY-ST-ZIP **Sarasota, FL 34232**

TITLE ☒ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 12 if changed, or on an attachment with an address, with all other filers empowered.

SIGNATURE: **Donald R. Mastropietro** **Donald R. Mastropietro** **1/8/02**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Corporate Secretary 941-378-8822
 Date Daytime Phone #

CR2E034 (9/01)