

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 16, 2002 8:00 am**  
**Secretary of State**

07-16-2002 90362 028 \*\*\*150.00

**DOCUMENT # P00000046145**

1. Entity Name  
**JOE VIOLA, INC.**

Principal Place of Business  
**3055 N.W. 28TH STREET  
LAUDERDALE LAKES FL 33311**

Mailing Address  
**3055 N.W. 28TH STREET  
LAUDERDALE LAKES FL 33311**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1015140**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORRALES, LYNN  
3055 N.W. 28TH STREET  
LAUDERDALE LAKES FL 33311**

Name

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

City

**FL**

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

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 \$550.00  
After September 13, 2002 Fee will be \$750.00  
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete  
NAME **CORRALES, LYNN**  
STREET ADDRESS **3055 N.W. 28TH STREET**  
CITY-ST-ZIP **LAUDERDALE LAKES FL 33311**

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 reports 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.

**SIGNATURE: X SIGNATURE REQUIRED**

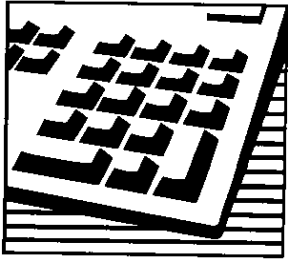
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/11/02 9546932955**

Date

Daytime Phone #

CR2E034 (4/02)



QTA ASSOCIATES, INC.

QUICKBOOKS • TAX • ACCOUNTING

*Attachment*

*127123*

July 11, 2002

Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

RE: Document # P00000046145  
JOE VIOLA INC.

Dear Sir or Madam:

Enclosed please find a check in the amount of \$150.00 to cover the annual report filing fee for the year 2002. My client just received the second notice in the mail this week, as there have been enormous problems with the mail. This is the first time the client has received a package from your office. Therefore, I am requesting abatement of any late fees associated with this matter.

Thank you in advance for your cooperation in this matter.

Sincerely,

*Angela DiCrescenzo*

Angela D. DiCrescenzo, CPA

Enclosure