

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

FRANCESCO'S INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

Not Applicable

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

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.

SIGNATURE

Kristin M. Perrott

(NOTE: Registered Agent signature required when reinstating)

9/3/00

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, 2001 Fee will be \$550.00  
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 NAME KRISTIN M. PERROTT  
STREET ADDRESS 10220 HILLTOP DR  
CITY-ST-ZIP NEW PORT RICHEY FL

TITLE NAME FRANK J. PERROTT  
STREET ADDRESS 10206 HILLTOP DR  
CITY-ST-ZIP NEW PORT RICHEY FL

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME  
STREET ADDRESS  
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TITLE 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)(f), 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 like empowered.

SIGNATURE:

Kristin M. Perrott

Date

Daytime Phone #

FILED  
Sep 13, 2001 8:00 am  
Secretary of State

09-13-2001 90018 010 \*\*\*150.00

A0085797

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)

9/3/01

Attachment  
DH#P000058876  
A0085797


Florida Dept of State

This is our first year of incorporation and I just realized from talking

with an associate that we are to file a form called a Uniform Business Report.

In speaking with one of your employees, I downloaded this form from your web site and

am forwarding it. Thank you.

  
Kristin Perrott

enclosed (check)