

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000078225

1. Entity Name  
AACRO, INC.

**FILED**  
**Apr 18, 2001 8:00 am**  
**Secretary of State**

04-18-2001 90036 030 \*\*\*150.00

Principal Place of Business  
2925 47TH AVENUE SOUTH  
SAINT PETERSBURG FL 33712

Mailing Address  
P.O. BOX 17104  
CLEARWATER FL 33762

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

59-3665888

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

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

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, 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

TITLE PD  
NAME SMITH, TERRICK  
STREET ADDRESS 2925 47TH AVENUE SOUTH  
CITY-ST-ZIP SAINT PETERSBURG FL 33712 ☐ Delete

TITLE CEO  
NAME HAYES, SHIRLEY S  
STREET ADDRESS 2925 47TH AVENUE SOUTH  
CITY-ST-ZIP SAINT PETERSBURG FL 33712 ☐ Delete

TITLE VD  
NAME EDWARDS, DEBRA  
STREET ADDRESS 2925 47TH AVENUE SOUTH  
CITY-ST-ZIP SAINT PETERSBURG FL 33712 ☐ Delete

TITLE S  
NAME HAYES, ALICIA  
STREET ADDRESS 2925 47TH AVENUE SOUTH  
CITY-ST-ZIP SAINT PETERSBURG FL 33712 ☐ Delete

TITLE T  
NAME SMITH, TASHA  
STREET ADDRESS 2925 47TH AVENUE SOUTH  
CITY-ST-ZIP SAINT PETERSBURG FL 33712 ☐ Delete

TITLE D  
NAME EDWARDS, COREY  
STREET ADDRESS 2925 47TH AVENUE SOUTH  
CITY-ST-ZIP SAINT PETERSBURG FL 33712 ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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STREET ADDRESS  
CITY-ST-ZIP

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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)