

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 OCT -8 PM 1:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Entity Name

P00000 106062

DO NOT WRITE IN THIS SPACE

600008328286--7
-10/11/02--01022--025
****150.00 ****150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2142 Reynolds St

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SPARASOTA FL

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1054622

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Emilia Rizzo

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

313 GARDINIA RD

SPARASOTA

FL

Zip Code

34209

**DO NOT WRITE
IN THIS SPACE**

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 is required when constituting)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

P
D
Rizzo Brenda
313 GARDINIA RD
VENICE FL

UP
D
Rizzo Emilia
313 GARDINIA RD
VENICE FL

ST
D
Rizzo JAY
313 GARDINIA RD
VENICE FL

**DO NOT WRITE
IN THIS SPACE**

**DO NOT WRITE
IN THIS SPACE**

**DO NOT WRITE
IN THIS SPACE**

**DO NOT WRITE
IN THIS SPACE**

**DO NOT WRITE
IN THIS SPACE**

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Emilia Rizzo

UP

9/3/02

Date

Print the Name

CR2E034B (12/01)

95 10/8/02

Sept 30, 2002

Division of Corporations
UBR Filings
P.O. Box 1500
Tallahassee, FL 32302

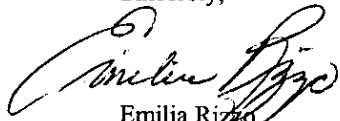
To Whom It May Concern:

On 9/30/2002 I called the State of Florida to speak with them concerning the UBR and notified them that I did not receive the first one to file, then on the above date I received the second notice and it was shredded and torn when I received it on the above date.

I spoke with Dawn she then transferred me to the Division of Corporations and I explained to them what happen I then was told to go online and print out a new UBR and to file it along with a check for \$ 150.00 CK # 0483 (enclosed), so that I would not have to pay the fee of \$ 550.00 to file my corporate papers.

Thank you in advance

Sincerely,

A handwritten signature in black ink, appearing to read "Emilia Rizzo", with a stylized flourish at the end.

Emilia Rizzo
Vice President
Document # Pooooo106062