

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P00000106501**

1. Entity Name

**DELRAY LADY, INC.****FILED**  
**Apr 27, 2001 8:00 am**  
**Secretary of State**

04-27-2001 90301 043 \*\*\*150.00

Principal Place of Business

**10565 SANTA LAGUNA DRIVE**  
**BOCA RATON FL 33428**

Mailing Address

**10565 SANTA LAGUNA DRIVE**  
**BOCA RATON FL 33428**

2. Principal Place of Business

**15128 Jog Road**  
Suite, Apt. #, etc.

3. Mailing Address

**15128 Jog Road**  
Suite, Apt. #, etc.

645607



DO NOT WRITE IN THIS SPACE

City &amp; State

**Delray Beach, FL**

Zip

**33446**

Country

**USA**

City &amp; State

**Delray Beach, FL**

Zip

**33446**

Country

**USA**

4. FEI Number

**65-1057991**☒ Applied For☐ Not Applicable5. Certificate of Status Desired ☐**\$8.75 Additional**  
Fee Required

6. Name and Address of Current Registered Agent

**MONTEMURRO, ANGELO**  
**344 NE 2 STREET**  
**BOCA RATON FL 33432**

7. Name and Address of New Registered Agent

Name

**Frank Prestia**

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

**15128 Jog Rd**

City

**Delray Beach**

State

**FL**

Zip Code

**33446**

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's signature required when reinstating)

DATE

**4/1/01**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	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>PRESTIA, ROSANNA</b>	
STREET ADDRESS	<b>10565 SANTA LAGUNA DRIVE</b>	
CITY - ST - ZIP	<b>BOCA RATON FL 33428</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>PRESTIA, FRANK</b>	
STREET ADDRESS	<b>10565 SANTA LAGUNA DRIVE</b>	
CITY - ST - ZIP	<b>BOCA RATON FL 33428</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>* President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Rosanna Prestia</b>	
STREET ADDRESS	<b>Same</b>	
CITY - ST - ZIP		
TITLE	<b>* Vice-President</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Frank Prestia</b>	
STREET ADDRESS	<b>Same</b>	
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

**4/1/01**

Date

**(561) 883-7955**

Daytime Phone #

CR2E034 (10/00)