

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

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91612 038 ***150.00

DOCUMENT # P00000110679

1. Entity Name

Wyoming Beach, Inc.

U 4 0 1 1 0

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

1014 Langer Way

Suite, Apt. #, etc.

1014 Langer Way

City & State

Delray Beach, FL

City & State

Delray Beach, FL

Zip

33483

Country

USA

Zip

33483

Country

USA

4. FEI Number

651064672

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

John E. Ingles

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

1014 Langer Way

City

Delray Beach

FL

Zip Code

33483

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

John E. Ingles

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/17/02

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

TITLE *President/Director*
NAME *John E. Ingles*
STREET ADDRESS *1014 Langer Way, Delray Beach, FL 33483*
CITY-ST-ZIP

TITLE *VP/Director*
NAME *Ronald V. Pugliese Jr.*
STREET ADDRESS *494 NE Plunkett Rd #4101, Stuart, FL 34996*
CITY-ST-ZIP

TITLE
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**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:

Ronald V. Pugliese Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/02

DATE

(772)-285-4885

Daytime Phone #

CR2E034B (12/01)