

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2001 8:00 am
Secretary of State

08-21-2001 90008 049 ***150.00

0085456 AV

DOCUMENT # P00000113318

1. Entity Name

URSO'S BASEBALL AND SOFTBALL ACADEMY, INC.

Principal Place of Business

**1809 E 2ND AVE
TAMPA FL 33605**

Mailing Address

**1809 E 2ND AVE
TAMPA FL 33605**

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

65-1062942

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

**URSO, SALVATORE J
15809 CRYING WIND DRIVE
TAMPA FL 33624**

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 **DPVS** ☐ Delete
NAME **URSO, SALVATORE J**
STREET ADDRESS **15809 CRYING WIND DRIVE**
CITY-ST-ZIP **TAMPA FL 33624**

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

TITLE **T** ☐ Delete
NAME **URSO, SALVATORE J**
STREET ADDRESS **15809 CRYING WIND DRIVE**
CITY-ST-ZIP **TAMPA FL 33624**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 (5/01)

Urso's Baseball and Softball Academy

1809 E. 2nd Avenue ~ Tampa, Fl 33605
Phone 813-242-8776

ATTACHMENT
(000530)

8/6/01

P00000113318

To whom it may concern:

I opened my own business in late January, a baseball and softball academy. I received a statement saying I had a late balance for not turning in my Uniform Business Report. However, I never received one prior to this. I spoke to a representative and she said that I was probably never sent one and to write a letter and explain that the late fee should be waived because I was never sent a UBR until now. Had I been made aware of this I would have gladly paid it on time and in full. I may not have been sent one considering I just opened up my business at the end of January. I have enclosed a check for \$150.00, which is the original amount due. I appreciate your time. If you have any question please call me at 813-242-8776. Thank you .

Sal Urso

