

# 2002 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # P01000008220**

1. Entity Name  
**PRO-STAGE OF AMERICA, INC.**

Principal Place of Business  
**3080 34TH STREET NORTH  
SAINT PETERSBURG FL 33713**

Mailing Address  
**3080 34TH STREET NORTH  
SAINT PETERSBURG FL 33713**

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.

☒ 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

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

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PSTD  
FERRY, BLAKE  
3080 34TH STREET NORTH  
SAINT PETERSBURG FL 33713** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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

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 #

04-02-2002 90850 001 \*\*\*450.00  
FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 DEC -6 AM 8:01



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)

**Dunlap, Andy**

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**From:** Charlied [cdeberry@tampabay.rr.com]  
**Sent:** Friday, December 06, 2002 4:04 PM  
**To:** Adunlap@mail.dos.state.fl.us  
**Subject:** Suaznne Ferry

Re: Pro-Stage of America

Dear Sir:

letter confirming my status as of April 15, 2002.

As per our telephone conversion, I'm sending you a

of 3 corporations and a check in the amount of \$450.00 for the following three corporations:  
Blakes Double D Blakes Ventures Inc.  
Prog-stage of America

I have sent an envelope showing documentation

was missing for Pro-Stage of America.

Unfortunately in our conversations the FEI number

After 10 days, I sent a second report with the FEI number for Pro-Stage of America and it was  
PO1000008220.

Please reinstate Pro-Stage of America as soon as possible.

Yours Truly,

Suzanne Ferry