

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90077 001 ***150.00

DOCUMENT # P01000008625

1. Entity Name
PINNACLE DEVELOPMENT CORPORATION

Principal Place of Business

1510 HAMMOCK LANE
PEMBROKE PINES FL 33026

Mailing Address

1510 HAMMOCK LANE
PEMBROKE PINES FL 33026



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1510 HAMMOCK LN

Suite, Apt., #, etc.
1510

3. Mailing Address

1510 HAMMOCK LN

Suite, Apt., #, etc.
1510

City & State
PEMBROKE PINES FL

City & State
PEMBROKE PINES FL

Zip
33026

Country
BROWARD

Zip
33026

Country
BROWARD

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

CADOZZI, JOHN
1510 HAMMOCK LANE
PEMBROKE PINES FL 33026

7. Name and Address of New Registered Agent

Name

N/A

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

N/A

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.

N/A

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
JOHN CADOZZI
1510 HAMMOCK LANE
PEMBROKE PINES FL 33026

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ **Delete**

TITLE
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CITY-ST-ZIP
☐ **Delete**

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CITY-ST-ZIP
☐ **Delete**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V.P.
C WILLIAM LATSTROM
1177 SE 3RD AVE
FT LAUDERDALE FL 33317
☐ **Change** ☒ **Addition**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SEC. TREAS.
JOHN D VOIGT
1177 SE 3RD AVE
FT LAUDERDALE FL 33317
☐ **Change** ☒ **Addition**

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

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

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:

0231 N.P. JOHN V CADOZZI 4/29/30958 4384985

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)