

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

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90326 042 ***150.00

DOCUMENT # P01000021669

1. Entity Name
First Source Payroll Corporation

DO NOT WRITE IN THIS SPACE

636208

2. Principal Place of Business
1903 South Congress Av.

3. Mailing Address
SAME

Suite, Apt. #, etc.
Suite 160

Suite, Apt. #, etc.

City & State
Boynton Beach, FL

City & State

4. FEI Number
59-3706865

Applied For
Not Applicable

Zip
33426

Country
US

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Carl A. Cascio

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

639 E Ocean Ave Suite 207

City
Boynton Beach FL Zip Code
33435

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) ☐

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
Director and CEO
NAME
John W. Luciani, III
STREET ADDRESS
1903 South Congress Ave #160
CITY-ST-ZIP
Boynton Beach, FL 33426

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
Director and President
NAME
Dorian Luciani
STREET ADDRESS
1903 South Congress Ave #160
CITY-ST-ZIP
Boynton Beach, FL 33426

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/9/02

CR2E034B (12/01)

ATTACH # P01000021669 / 636208



LAW OFFICES

Carl A. Cascio, P.A.

Carl A. Cascio

OF COUNSEL

Gary S. Gaffney

BOARD CERTIFIED REAL ESTATE ATTORNEY

FIRST FINANCIAL PLAZA
639 EAST OCEAN AVENUE, SUITE 207
BOYNTON BEACH, FLORIDA 33435
(561) 736-7743
FAX (561) 737-9775

April 10, 2002

Department of State
Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: First Source Payroll Corporation
Document # P01000021669

Dear Sir or Madam:

Enclosed please find the Annual Report for the above referenced corporation. Also enclosed is check # 1041 in the amount of \$150.00 made payable to the Department of State representing the 2002 filing fee.

Thank you for your attention to this matter.

Very truly yours,

Carl A. Cascio

CAC/mkm
Enclosure