

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 28, 2002 8:00 am
Secretary of State

07-28-2002 90174 017 ***150.00

DOCUMENT # P01000034401

1. Entity Name

JOHN GIGANTE REAL ESTATE SALES, INC.

Principal Place of Business

**1939 SW YORK LANE
 PALM CITY FL 34990**

Mailing Address

**1939 SW YORK LANE
 PALM CITY FL 34990**

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

65-1089272

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**EDGE, JOSEPH
 932 SW BAYSHORE BLVD
 PORT ST LUCIE FL 34983**

7. Name and Address of New Registered Agent

Name **John Gigante**

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

1939 S.W. YORK LANE

Palm City FL 34990

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *John Gigante*

(NOTE: Registered Agent signature required when reinstating)

DATE

7-8-02

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 13, 2002 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

TITLE **PRES** ☐ Delete
 NAME **JOHN GIGANTE**
 STREET ADDRESS **1939 SW YORK LANE**
 CITY-ST-ZIP **PALM CITY FL 34990**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
 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: *John Gigante*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-08-02

Date

Daytime Phone #

CR2E034 (4/02)

Attachment#
FOI000034401/
675433

THE TAX SHOPPE

932 SW Bayshore Blvd.
Port St. Lucie, FL 34983
(772) 879-2895
(772) 879-2894 Fax
Email: TaxShopeFla@aol.com

July 22, 2002

Florida Department of State
P O Box 6327
Tallahassee, Florida 32314

Re: Renewal / Annual Corporation Report

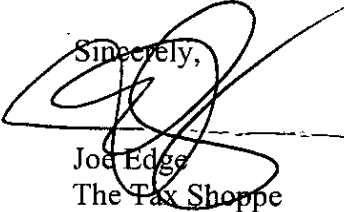
Dear Sirs:

Enclosed you will find a check in the amount of \$150 for payment of the Annual Report fee for our corporation. The original of the document was either lost or otherwise undelivered and we were not aware that it had to be paid. Please accept this payment and process it accordingly.

Further, please review your records to ensure the correct address is as it appears below.

If you have any questions, please contact us at your earliest convenience.

Sincerely,


Joe Edge
The Tax Shoppe

cc:

John Gigante Real Estate Sales Inc
1939 SW York Lane
Palm City, Florida 34990