

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

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

07-28-2002 90195 048 ***150.00

DOCUMENT # **PO1000047536**

1. Entity Name **THE DiROMA GROUP, INC.**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1743 LAKE CYPRESS DR

3. Mailing Address

1743 LAKE CYPRESS DRIVE

Suite, Apt. #, etc.

1743

Suite, Apt. #, etc.

1743

DO NOT WRITE IN THIS SPACE

City & State

SAFETY HARBOR, FL

City & State

SAFETY HARBOR, FL

4. FEI Number

59-3714468

Applied For

Not Applicable

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

MICHAEL R. DiROMA

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

1743 LAKE CYPRESS DRIVE

City

SAFETY HARBOR

FL

Zip Code

34695

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

Michael R. DiRoma

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/22/02
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
NAME
STREET ADDRESS
CITY - ST - ZIP
**PSD
MICHAEL R. DiROMA
1743 LAKE CYPRESS DRIVE
SAFETY HARBOR, FL 34695**

TITLE
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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:

Michael R. DiRoma

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/22/02

Daytime Phone #

CR2E034B (12/01)

Attachment PO10000047536

July 22, 2002

Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Dear Division of Corporations:

I just did my taxes and my accountant asked to see my UBR report. I called your number and I realized I had not done it yet because I never received it. When I moved to my new address I thought my mail was forwarded but for some reason this form was not sent to me, so I missed the filing date. As this is my first year as a corporation, and I'm still confused, I didn't look for this form to fill out, until my accountant asked me for it.

Now, I realize that I am really late and could owe a penalty. I am asking you to take pity on me and forgive the penalty.

I printed this form from your web site and I am submitting this form now. Therefore, I am enclosing a check for \$150.00

Old Address:

The DiRoma Group, Inc.
2809 Eagle Run Circle South
Clearwater, FL 33760-1949

New Address

The DiRoma Group, Inc.
1743 Lake Cypress Drive
Safety Harbor, FL 34695

Thank you very much;



Michael R. DiRoma
The DiRoma Group