

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000048449

FILED  
Apr 16, 2003  
Secretary of State

Entity Name: PROVCO, INC.

**Current Principal Place of Business:**

10520 SW 103 AVE  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

10520 SW 103 AVE  
MIAMI, FL 33176

**New Mailing Address:**

FEI Number: 65-1118425

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TOMASSI, JACQUELYN  
10520 SW 103 AVE  
MIAMI, FL 33176

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: TOMASSI, PIETRO  
Address: 10520 SW 103 AVE  
City-St-Zip: MIAMI, FL 33176

Title: VD ( ) Delete  
Name: TOMASSI, JACQUELYN  
Address: 10520 SW 103 AVE  
City-St-Zip: MIAMI, FL 33176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACQUELYN TOMASSI

VD

04/16/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date