

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

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90035 012 ***150.00

DOCUMENT # **PO1000050396**

1. Entity Name

DONNA MENENDEZ, P.A.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5133 INAGUA WAY

3. Mailing Address

5133 INAGUA WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NAPLES, FL

City & State

NAPLES, FL

4. FEI Number

59-3720674

Applied For

Not Applicable

Zip

34119

Country

Zip

34119

Country

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

THOMAS WANDERON

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

868 106TH AVE.N.

City

NAPLES

FL

Zip Code

34108

**DO NOT WRITE
IN THIS SPACE**

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.

THOMAS WANDERON

(NOTE: Registered Agent signature required when reinstating)

02/12/02

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
**D
MENENDEZ, DONNA S.
5133 INAGUA WAY
NAPLES, FL 34119**

TITLE
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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 or without other like empowered.

SIGNATURE: x

Donna Menendez

DONNA S. MENENDEZ

x

2/14/02

Date

941-992-2929

Daytime Phone #

CR2E034B (12/01)