

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90174 048 ***150.00

DOCUMENT # P01000054694

1. Entity Name
FIRST UP ENTERPRISES, INCORPORATED

Principal Place of Business

**5190 38TH WAY SOUTH
 ST. PETERSBURG FL 33711**

Mailing Address

**5190 38TH WAY SOUTH
 ST. PETERSBURG FL 33711**

2. Principal Place of Business

351 N. TESSIER DR.

3. Mailing Address

351 N. TESSIER DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ST Pete Bch FL

City & State

ST Pete Bch.

4. FEI Number

59-3725494

Applied For

Not Applicable

Zip

Country

33706

PINNELLAS

Zip

Country

33706

PINNELLAS

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MERINGO, ROBERT J
 5190 38TH WAY SOUTH
 ST. PETERSBURG, FL 33711**

7. Name and Address of New Registered Agent

Name

MERINGO Robert J

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

351 N. TESSIER DR.

City

ST PETE BEACH FL.

FL

Zip Code

33706

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 **Robert J. Meringo President**

Robert J Meringo

4/1/02

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) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 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 **PD** ☐ Delete
 NAME **MERINGO, ROBERT J**
 STREET ADDRESS **5190 38TH WAY SOUTH**
 CITY-ST-ZIP **ST. PETERSBURG FL 33711**

TITLE **VTD** ☐ Delete
 NAME **COURTNEY, SHIRLEE**
 STREET ADDRESS **9217 TUDOR DR.**
 CITY-ST-ZIP **TAMPA FL 33615**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 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 **351 N. TESSIER DR.**
 CITY-ST-ZIP **ST PETE Bch FL 33706**

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

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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: **Robert J. Meringo President**

Robert J Meringo

4/1/02 (727) 365-2811

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)