|  | NIFOR   | M BUSINE   | ORPORATI<br>SS REPOR   |                                   | BR)   | FILED<br>Jul 22, 2002 8:00 an<br>Secretary of State  |  |
|--|---|--|--|-----------------------------------|---|--|--|
|  |   | P010000591   | 47   |                                   |   | 07-22-2002 90163 009 ***150.00   |  |
| Entity Name  |   | -1   |  |                                   |   | 1  |  |
|  | Josej   | ph Desanti,  | P.A.   |                                   |   | ./   |  |
|  |   |  |  |                                   |   | V  |  |
| 2221   | North 5   | 2nd Avenue   |  |                                   |   |  |  |
|  |   | L 33021  |  |                                   |   |  |  |
| поттуч   | woou, 11  | 55021  |  |                                   |   |  |  |
| 2 Principal Pla  | ace of Business   | AN FIN   | 3. Mailing Address   |                                   | -   | B0130892   |  |
|  |   | lt Street  | 4800 Roose   | evelt                             | Stre  |  |  |
| Suite, Apt. #  | #, etc.   |  | Suite, Apt. #, etc.  |                                   |   | DO NOT WRITE IN THIS SPACE   |  |
| Ciby & State   |   |  | City & State   |                                   |   | 4. FEI Number Applied For  |  |
| City & State<br>Hollywood, FL 33021  |   | 33021  | Hollywood, FL 33021  |                                   | 33021   | 65-1113640 Not Applied   |  |
| Zip<br>33021   | С   | ountry   | Zip  | Count                             | try   | 5. Certificate of Status Desired \$8.75 Additional   |  |
| 33021  | 0   | SA   | 33021  | <u> </u>                          | SA  | Fee Required   |  |
| Jos  | seph Des  | santi  |  |                                   | <u>*NEW</u><br>Name   |  |  |
| 2221 North 52nd Avenue   |   |  |  |                                   | Joseph Desanti  |  |  |
| Hollywood, FL 33021  |   |  |  |                                   | Street Add  | dress (P.O. Box Number is Not Acceptable)  |  |
| τ  |   |  |  |                                   |   | 4800 Roosevelt Street  |  |
|  |   |  |  |                                   | City .  |  |  |
|  |   |  |  |                                   | L   | Hollywood <b>FL</b> Zip Code<br>33021<br>egistered agent, or both, in the State of Florida.  |  |
| 9. This corpor<br>Tax filing re  | <u> </u>  | to satisfy its Intangible<br>elects to do so.          | January 1  | May 1 Feel<br>y 1, Feel<br>ed UBR | se is \$150.0<br>s \$550.00<br>s \$61.25                      | 10. Election Campaign Financing \$5.00 May Bit   Trust Fund Contribution. Added to Fees  |  |
| 11.  | <u> </u>  | OFFICERS AND DI  | A REAL PROPERTY AND A REAL | int i the part of the part of the |   | EW:  |  |
| TITLE  | ₽D .  |  |  |                                   | 4   | PD   |  |
|  |   | Desanti<br>orth 52nd A                                 |  |                                   |   | Joseph Desanti<br>4800 Roosevelt Street  |  |
| CITY-ST-ZIP  | Hollywo   | od, FL 330   | 21   | 1                                 | ST-ZP   | Hollywood, FL 33021  |  |
| TITLE  |   |  |  | me                                | Charles Said  |  |  |
| NAME   |   |  |  | NAM                               |   |  |  |
| STREET ADDRESS<br>CITY - ST-ZIP  |   |  |  | 24                                | ET ADDRESS  |  |  |
| TITLE  |   |  |  | TITLE                             |   |  |  |
| NAME   | ·   | •  |  | 1012                              |   |  |  |
| STREET ADDRESS   | •   |  |  |                                   | ET ADDRESS  |  |  |
| CITY - ST - ZIP  |   |  |  |                                   | - \$T- ZIP  | and a strange of the second second<br>Second second                   |  |
| title<br>Name  |   | · · · ·  |  | TITLE                             |   |  |  |
| STREET ADDRESS   |   |  |  | STRE                              | ET ADORESS  |  |  |
| CITY-ST-ZIP  |   |  |  | CITY                              | -ST-ZIP   |  |  |
| TITLE  |   |  |  | TILE                              | · · ·   |  |  |
| NAME<br>STREET ADDRESS   |   |  |  |                                   | ET ADORESS  |  |  |
|  |   |  |  | CITY                              | - ST- ZIP   | · · · · · · · · · · · · · · · · · · ·  |  |
| CITY-ST-ZIP  |   |  |  | TITLE                             |   | : · · · ·  |  |
|  |   |  |  |                                   | • 1   |  |  |
| CITY-ST-ZIP<br>TITLE<br>NAME   |   |  | ·.   | NAME                              | E   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS  |   |  | ·.   | NAME                              |   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | pertify that the inf  |  | in filing does not qualify t   | NAM<br>Stre<br>City               | E<br>ET ADORESS<br>- ST- ZIP                                  | d in Section 119 07(3)(i) Florida Statutas Liburbor couling that the information   |  |
| TITLE<br>VAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>13. I hereby c<br>indicated<br>of the corr | on this report or<br>poration or the r                      | supplemental report is tr<br>eceiver or trustee emport | ue and accurate and that<br>wered to execute this rep  | for the exer                      | E<br>ET ADDRESS<br>-ST-ZIP<br>mption stated<br>ture shall hav | d in Section 119.07(3)(i), Florida Statutes. I further certify that the information<br>re the same legat effect as if made under oath; that I am an officer or director<br>pter 607. Florida Statutes; and that my name appears in Block 11 or on an |  |
| ITLE<br>IAME<br>TREET ADDRESS<br>ITY-ST-ZIP<br>3. I hereby c<br>indicated<br>of the corr     | on this report or<br>poration or the r                      | supplemental report is th                              | ue and accurate and that<br>wered to execute this rep  | for the exer                      | E<br>ET ADDRESS<br>-ST-ZIP<br>mption stated<br>ture shall hav | d in Section 119.07(3)(i), Florida Statutes. I further certify that the information<br>re the same legal effect as if made under oath; that I am an officer or directo<br>opter 607. Florida Statutes; and that my name appears in Block 11 or on an |  |
| ITTLE<br>IAME<br>STREET ADDRESS<br>CITY-ST-ZIP<br>I3. I hereby c<br>indicated<br>of the corr | on this report or<br>poration or the n<br>nt with an addres | supplemental report is tr<br>eceiver or trustee emport | ue and accurate and that<br>wered to execute this rep  | for the exer                      | E<br>ET ADDRESS<br>-ST-ZIP<br>mption stated<br>ture shall hav | e the same legal effect as it made under path; that I am an officer or director  |  |

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LASHBROOK & WOLLARD, P.A. **CERTIFIED PUBLIC ACCOUNTANTS** 

> Member of the Florida Institute of Certified Public Accountants

4481 Stirling Road

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info@lbrook.com

Fort Lauderdale, Florida 33314 Telephone: (954) 581-8112

Dru D. Lashbrook, CPA Brian H. Wollard, CPA David J. Fasano, CPA, MBA Dean R. Lashbrook July 18, 2002

> Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

RE: Joseph DeSanti, P. Document # P0100005914

To whom it may concern:

We are the Certified Public Accountants for the above referenced corporation. It came to our attention that our client did not receive their 2002 UBR Report and that it is probably due to the fact that their mailing address has changed.

We contacted the State and they informed us to mail the UBR Report with \$150.00 immediately. Enclosed please find the report and check for \$150.00 as requested. If you should have any questions, please contact our office. Thank you.

Sincerely,

LASHBROOK & WOLLARD, P.A.

Dru D. Lashbrook, CPA For the firm.

DDL/kd Enclosures