

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90146 036 ***150.00

DOCUMENT # P01000059507

1. Entity Name
SABATO REAL ESTATE, INC.



Principal Place of Business
**3660 HOLLOW TRAIL COURT
PALM HARBOR FL 34684**

Mailing Address
**3660 HOLLOW TRAIL COURT
PALM HARBOR FL 34684**



2. Principal Place of Business

7040 PORTMARNOCK PLACE

Suite, Apt. #, etc.

3. Mailing Address

7040 PORTMARNOCK PLACE

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

BRADENTON, FLORIDA

Zip

34202

Country

U.S.A.

City & State

BRADENTON, FLORIDA

Zip

34202

Country

U.S.A.

4. FEI Number

59-3726091

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

SABATO, PHILIP F

3660 HOLLOW TRAIL COURT

PALM HARBOR FL 34684

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Philip F. Sabato

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/17/03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **PS** ☒ Delete
NAME **SABATO, PHILIP F**
STREET ADDRESS **3660 HOLLOW TRAIL COURT**
CITY-ST-ZIP **PALM HARBOR FL 34684**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PS** ☒ Change ☐ Addition
NAME **SABATO, PHILIP F.**
STREET ADDRESS **7040 PORTMARNOCK PLACE**
CITY-ST-ZIP **BRADENTON, FLORIDA 34202**

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

TITLE ☐ Change ☐ Addition
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NAME
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Philip F. Sabato

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/17/03

727-786-4355 UNTIL 3/29/03

941-373-6755 AFTER 4/1/03

CR2E034 (10/02)