

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 02, 2003 8:00 am
Secretary of State

06-02-2003 90199 001 ***150.00

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1. Entity Name
IMPERIO FLORIDA, INC.



Principal Place of Business
**12236 SW 8 STREET
MIAMI FL 33184**

Mailing Address
**6801 NW 77 AVE
102
MIAMI FL 33166**



2. Principal Place of Business
12015 SW 18 terrace

3. Mailing Address
12015 SW 18 terrace

Suite, Apt. #, etc.
#13

Suite, Apt. #, etc.
#13

City & State.
Miami, FL 33175

City & State
Miami, FL

Zip
33175

Country

Zip
33175

Country

4. FEI Number
50-0005810

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**VECCHIO, DANI D
6801 NW 77 AVE #102
MIAMI FL 33166**

7. Name and Address of New Registered Agent

Name
Vecchio, Dani Del
Street Address (P.O. Box Number is Not Acceptable)
12015 SW 18 terrace #13
City
Miami FL Zip Code
33175

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 *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
VECCHIO, DANI DEL
12236 SW 8 STREET
MIAMI FL 33184** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Vecchio, Dani Del
12015 SW 18 terrace #13
Miami, FL 33175** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PVST
VECCHIO, DANI DEL
12236 SW 8 STREET
MIAMI FL 33184** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PVST
Delvecchio, Dani
12015 SW 18 terrace #13
Miami, FL 33175** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/28/03 **3055544428**

Date

Daytime Phone #

CR2E034 (10/02)