

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000089787	
1. Entity Name VELIERI ENTERPRISES, INC.	
	
Principal Place of Business 665 SE 21ST AVENUE SUITE 102 DEERFIELD BEACH, FL 33441	Mailing Address 665 SE 21ST AVENUE SUITE 102 DEERFIELD BEACH, FL 33441
2. Principal Place of Business 1251 S. Federal Hwy. Suite, Apt., #, etc. #114	3. Mailing Address 1251 S. Federal Hwy. Suite, Apt., #, etc. #114
City & State Boca Raton, Florida	City & State Boca Raton, Florida
Zip 33432	Zip 33432
Country USA	Country USA
4. FEI Number 65-1136175	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VELIERI, SUSAN 665 SE 21ST AVENUE SUITE 102 DEERFIELD BEACH, FL 33441	
7. Name and Address of New Registered Agent Name Susan Velieri Street Address (P.O. Box Number is Not Acceptable) 1251 S. Federal Hwy. #114 City Boca Raton FL 33432	
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 the registered agent. SIGNATURE Susan Velieri Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when re-stating) DATE	
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS TITLE D ☐ Delete NAME VELIERI, SUSAN STREET ADDRESS 665 SE 21ST AVENUE CITY-ST-ZIP DEERFIELD BEACH, FL 33441	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Change ☐ Addition NAME Susan Velieri STREET ADDRESS 1251 S. Federal Hwy. #114 CITY-ST-ZIP Boca Raton, FL 33432	
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 registered trustee empowered to prepare 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 Susan Velieri SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 4/28/03 561-447-4023 Daytime Phone #	

11032378



☒ CHECK HERE IF MAKING CHANGES

CR2EG34 (10/02)