

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90374 047 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

RVP, INC F01000090225

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1474 MADATEE CL.

Suite, Apt. #, etc.

3. Mailing Address

SAME

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TARPON SPRINGS, FL.

City & State

4. FEI Number

59-3747024

Applied For

Not Applicable

Zip

34689

Country

PUERTO RICO

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Robert PELLECHIO

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

1474 MADATEE CL.

City

TARPON SPRINGS

FL

Zip Code

34689

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

4/10/02

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY - ST - ZIP
PRESIDENT / TREASURER
Robert PELLECHIO
1474 MADATEE CL
TARPON SPRINGS FL 34689

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V. PRESIDENT / SEC.
CAROL A. PELLECHIO
1474 MADATEE CL
TARPON SPRINGS FL 34689

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert PELLECHIO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/02

DATE

727-639-8483

Daytime Phone #

CR2E034B (12/01)