

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

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DOCUMENT # 001000104419

1. Entity Name

Gitta's Promotional Sales, Inc.

FILED

02 OCT 29 AM 9:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5320 Hawkes Bluff Ave

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

DAVIE, FLORIDA

City & State

4. FEI Number

59-3758275

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

GITTA SAPIANO

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

5320 Hawkes Bluff Ave

City

DAVIE

FL

Zip Code

33331

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

Gitta Sapiano President

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

(NOTE: Registered Agent signature required when reinstating)

10/23/03

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 CEO
GITTA SAPIANO
5320 Hawkes Bluff Ave
DAVIE FL 33331

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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10/29/02--01136--023. **150.00

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CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Vice President
ALEX SAPIANO
5320 Hawkes Bluff Ave
DAVIE FL 33331

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gitta Sapiano

10/23/02

DATE

Daytime Phone #

954-646-1472

CR2E034B (12/01)

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October 23, 2002

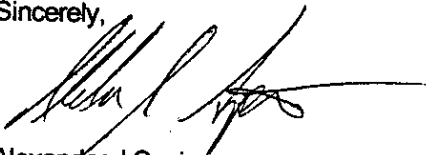
RE: Uniform Business Report

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir,

Enclosed please find the Uniform Business Report and check for fees. Our accountant informed us of the necessity of this report, as we never received paperwork for it. If questions arise, please contact Gitta Sapiano (president) or myself at 954 646-1472.

Sincerely,

A handwritten signature in black ink, appearing to read 'Alexander J Sapiano', with a long horizontal flourish extending to the right.

Alexander J Sapiano
Vice President
Gitta's Promotional Sales