## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)							FILED Sep 12, 2003 8:00 am Secretary of State					
DOCU	MENT # P0100	010	8744				Seci	retar	y o	i Sta	.te	
1. Entity Nan			D				09-12	2-2003 900	088 018	3 ***150.0	00	
Principal Plac COUNTY OF 1 168 QUAIL CT DAYTONA BEA	•	168 (	ng Address Duail CT Orange Fl 32127									
2. Principal F	Place of Business	3. Ma	illing Address				8 <b>4</b> (800) 4(8 <b>40</b> 10) 9	JOH 30111 00511 1	U   U   U   U   U   U   U   U   U   U		DIBIL BIBL IBBL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & State		City & State				4. FEI Number APPLIED FOR Applied For Not Applicable						
Zip	Country	Zip		Country			cate of Status	<u> </u>		\$8.75 Ad Fee Require		
<u> </u>	6. Name and Address of Current	Register	ed Agent	Name		7. Name	and Address	of New Rec	istered	Agent		
PASSAMONTE, PAUL F II 168 QUAIL CT				et Address (P.O. Box Number is Not Acceptable)								
DAYTONA BEACH FL 32127					<del> </del>	<del></del>			•			
				City			· · · · · · · · · · · · · · · · · · ·		FL	Zip Coo	ie	
SIGNATURE F After Se	Signature, typed or printed name of registered agent in the ILE NOW!!! FEE IS \$550.00 ptember 10, 2003 Fee will be \$750 k Payable to Florida Department of	.00	plicable. (NOTE: F	legistered Agent signat	ure required v		g) . Election Car Trust Fund C		DATE		00 May Be	
10,	OFFICERS AND	DIRECTO		11.		ADDITIO	NS/CHANGE	S TO OFFIC	ERS AND			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP\$T Passamonte, Paul F II 623 Virginia Ave. Holly Hill Fl 32117		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PASSAMONTE, MICHELLE 623 VIRGINIA AVE. HOLLY HILL FL 32117		☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	Pas	SAMO	nte, M	lichel	le	Change	☐ Addition	
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/06 /03 386/212 5998

Affachment 9.0156483 P01000108744

DIVISION OF CORPORATIONS Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

Passamonte Enterprises Inc. 168 Quail Court Port Orange, FL 32127

September 6, 2003

## **Dear DIVISION OF CORPORATIONS:**

This correspondence comes to you attached to our corporation filing report for the year 2003. We have to apologize for the delay in the filing of my 2003 report, as you can see in your records we have changed addresses over the past year. Additionally in the past our accountant had taken care of this for us. Again we apologize for the delay with this report but to a break down some where in the system this is the first time we are seeing this form.

Any consideration in this matter will be greatly appreciated.

Respectfully,

Passamonte Enterprises, Inc.

Enclosure (1)

pfp