

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

02 OCT -7 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B01388000

DOCUMENT # P010001107341. Entity Name
VISUAL INTERIOR INC.

Principal Place of Business

**157 COOPER CT.
ORLANDO FL 32835**

Mailing Address

**157 COOPER CT.
ORLANDO FL 32835**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3756940

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**MARTIN, VINCENT M
1011 OLETHA CT.
APOPKA FL 32703**

7. Name and Address of New Registered Agent

Name **LIONEL HOILETTA**

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

157 COOPER COURT

City

Orlando

FL

Zip Code

32835

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]

(NOTE: Registered Agent signature required when reinstating)

DATE

9-11-029. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)**FILE NOW!!! FEE IS \$550.00 ✓**
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **President**
NAME **LIONEL HOILETTA**
STREET ADDRESS **157 COOPER COURT**
CITY-ST-ZIP **Orlando FL 32835**☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

CR2E034 (4/02)

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 Block 12 if changed, or on an attachment with an address with another like empowered.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9-11-02

Daytime Phone #

9/10/02

Attachment

**Visual Interior Inc.
157 Cooper Court
Orlando FL 32835-1267**

September 11, 2002

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

Re: Document # P01000110734-Uniform Business Report
For Visual Interiors Inc.

Dear Sirs:

Find attached the referenced document, along with the initial renewal fee of \$150.00, renewing my corporation for the 2002/2003 year.

This blank report was the first one I received. The first one sent by the Division of Corporations, never made it to my address.

I had to work at getting the money together to renew this corporation.

I respectfully ask that the penalty of \$400.00 be cancelled.

Sincerely yours,


Lionel Hoilette, Pres.