## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Sep 04, 2002 8:00 am Secretary of State P01000120901 DOCUMENT # 1. Entity Name 09-04-2002 90093 007 \*\*\*150.00 VIZAC VARIETY, INC. Principal Place of Business Mailing Address 519 BRIGHTON WAY 519 BRIGHTON WAY CASSELBERRY FL 32707 CASSELBERRY FL 32707 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For EINO/-0583360 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BORGELA, KETTLY Street Address (P.O. Box Number is Not Acceptable) 519 BRIGHTON WAY CASSELBERRY FL 32707 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the statement for the purpose of changing its registered office or registered agent, or both, in the the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI F ☐ Delete TITLE ☐ Addition ☐ Change BORGELA, KETTLY NAME NAME 519 BRIGHTON WAY STREET ADDRESS STREET ADDRESS CASSELBERRY FL 32707 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition **BORGELA, SAINTANE** NAME **519 BRIGHTON WAY** STREET ADDRESS STREET ADDRESS CASSELBERRY FL 32707 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

FILED

Daytime Phone #

## Attachment 918194 Poloxo120901

VIZAC Christy, The 519 Blighton Way (asselberry, Fl 32)0) Hel # 40)-265-3941 To-whom It may concern: We pled to incorporate but December with the intention of opening a retail store. Since the store has not been opened yet, and we filed at the end of the year, we thought we didnot need to send in the UBR this year. Falled secently and was informed that we gtill have to send it is Could you please waive the late fee for us! We would greatly appreciate if ! Thouk you! helly Suy foll Bongela