

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90761 046 ***150.00

DOCUMENT # P02000027222

1. Entity Name
RAYMOND WALTER BOROTA, INC.



Principal Place of Business
**3 SOUTH PINE CIRCLE DRIVE
BELLEAIR FL 33756**

Mailing Address
**POST OFFICE BOX 47132
ST. PETERSBURG FL 33743**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-3616740

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BOROTA, RAYMOND W
3 SOUTH PINE CIRCLE DRIVE
BELLEAIR FL 33756**

Name

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

City

FL

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 State of Florida. I am familiar with, and accept 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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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**PRESIDENT
RAYMOND W BOROTA
3 SOUTH PINE CIRCLE DRIVE
BELLEAIR FL 33756**

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 individual sole proprietorship covered by this report and that I am not a resident of another state or foreign country and that my name appears in Block 10 or Block 11 if changed, or on an attached sheet with this report with all the like information.

RAYMOND W BOROTA, PRESIDENT

SIGNATURE:

Signature

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-03 727-345-4639

Date Daytime Phone #

CR2E034 (10/02)