

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 16, 2003 8:00 am**  
**Secretary of State**

04-16-2003 90186 013 \*\*\*150.00

**DOCUMENT # P02000045277**

1. Entity Name  
**MONSTERART.NET INC**

Principal Place of Business  
**6860 GULFPORT BLVD S  
# 102  
ST PETERSBURG, FL 33707**

Mailing Address  
**6860 GULFPORT BLVD S  
# 102  
ST PETERSBURG, FL 33707**

**90089138**

2. Principal Place of Business  
**7011 PLACE DE LA PAIX**

Suite, Apt. #, etc.  
**1A**

City & State  
**SOUTH PASADENA, FL**

Zip  
**33707**

Country  
**USA**

3. Mailing Address  
**7011 PLACE DE LA PAIX**

Suite, Apt. #, etc.  
**1A**

City & State  
**SOUTH PASADENA, FL**

Zip  
**33707**

Country  
**USA**



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number  
**03-0431510**

Applied For  
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**SCIABBARRASI, MICHAEL S  
6860 GULFPORT BLVD S  
# 102  
ST PETERSBURG, FL 33707**

7. Name and Address of New Registered Agent

Name  
**MICHAEL S. SCIABBARRASI**  
Street Address (P.O. Box Number is Not Acceptable)  
**7011 PLACE DE LA PAIX**  
**1A**  
City  
**SOUTH PASADENA** FL Zip Code  
**33707**

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 *Michael S. Sciabbarrasi*

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

**4/14/03**

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

**pd. ck. # 1020**  
**4/14/03**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

|                                                |                                                                                                 |                                 |
|------------------------------------------------|-------------------------------------------------------------------------------------------------|---------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>P<br/>SCIABBARRASI, MICHAEL S<br/>6860 GULFPORT BLVD S # 102<br/>ST PETERSBURG, FL 33707</b> | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                 | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                 | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                 | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                 | <input type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                 | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|                                                |                                                                                                        |                                                                              |
|------------------------------------------------|--------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PRESIDENT<br/>MICHAEL S. SCIABBARRASI<br/>7011 PLACE DE LA PAIX 1A<br/>SOUTH PASADENA, FL 33707</b> | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |

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: *Michael S. Sciabbarrasi*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/14/03 727 346-9700**

Date

Daytime Phone #

CR20034 (10/02)

Attachment

April 14, 2003

90089138

Michael S. Sciabbarrasi  
7011 Place de la Paix 1A  
South Pasadena, FL 33707  
(727) 346-9700

Florida Department of State  
Division of Corporations  
Corporate Filings  
PO Box 6327  
Tallahassee, FL 32314

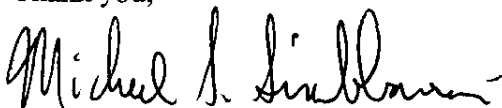
RE: GulfRealty.net Inc. Document #: 02000040047  
MonsterArt.net Inc. Document #: 02000045277

To Whom it may concern

Enclosed are the annual UBR's for the above named corporations along with their respective filing fees of \$150.00 each.

I am requesting a PIN for each of the above named corporations so that I may file online in the future.

Thank you,



Michael S. Sciabbarrasi  
President  
GulfRealty.net Inc.  
MonsterArt.net Inc.