

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90118 013 ***150.00

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DOCUMENT # P02000088637

1. Entity Name

VELENO INSTRUMENT COMPANY



Principal Place of Business
**11867-34TH STREET NORTH
ST. PETERSBURG FL 33716**

Mailing Address
**11867-34TH STREET NORTH
ST. PETERSBURG FL 33716**

2. Principal Place of Business

3. Mailing Address

P.O. Box 55268

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

St. Petersburg, FL

4. FEI Number

01-0754213

Applied For

Not Applicable

Zip

Country

Zip

Country

33732

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

**VELENO, JOHN M
11867-34TH STREET NORTH
ST. PETERSBURG FL 33716**

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	VELENO, JOHN M	11867-34TH STREET NORTH	ST. PETERSBURG FL 33716	<input type="checkbox"/>
VPD	VELENO, CHRISTOPHER	11867-34TH STREET NORTH	ST. PETERSBURG FL 33716	<input type="checkbox"/>
VPTD	MARKS, MARCELLA M	11867-34TH STREET NORTH	ST. PETERSBURG FL 33716	<input type="checkbox"/>
VPSD	PEACOCK, CHRISTINE L	11867-34TH STREET NORTH	ST. PETERSBURG FL 33716	<input type="checkbox"/>
VPD	VELENO, CARLA V	11867-34TH STREET NORTH	ST. PETERSBURG FL 33716	<input type="checkbox"/>
VPD	RUSSELL, MICHELLE V	11867-34TH STREET NORTH	ST. PETERSBURG FL 33716	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	VELENO, JOHN M	P.O. Box 55268	ST. PETERSBURG, FL 33732	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VPD	VELENO, CHRISTOPHER	P.O. Box 55268	ST. PETERSBURG, FL 33732	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VPTD	MARKS, MARCELLA M	P.O. Box 55268	ST. PETERSBURG, FL 33732	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VPSD	PEACOCK, CHRISTINE L.	P.O. Box 55268	ST. PETERSBURG, FL 33732	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VPD	VELENO, CARLA V.	P.O. Box 55268	ST. PETERSBURG, FL 33732	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VPD	RUSSELL, MICHELLE V	P.O. Box 55268	ST. PETERSBURG, FL 33732	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:

John M. Veleno
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan 10, 2003 (727) 526-8105

CR2E034 (10/02)