


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
03 SEP -2 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO 2000097381	
1. Entity Name Liviero Construction Company 2144 Gulf Gate Drive Sarasota, FL 34231	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2144 Gulf Gate Drive Suite, Apt. #, etc.	3. Mailing Address SAME Suite, Apt. #, etc.
City & State Sarasota, FL	City & State
Zip 34231	Country USA
Zip 34231	Country USA

200020879122
06/16/03-01018-017 ***508.75
DO NOT WRITE IN THIS SPACE

4. FEI Number 42-1549940	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name Francesco Giannini	
Street Address (P.O. Box Number is Not Acceptable) 2144 Gulf Gate Drive	
City Sarasota	FL Zip Code 34231

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 See below (NOTE: Registered Agent signature required when renouncing) DATE

January 1 - May 1: Fee is \$150.00
After May 1: Fee is \$350.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Luca Liviero 2144 Gulf Gate Drive Sarasota, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D Loretta Liviero 2144 Gulf Gate Drive Sarasota, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T/D Francesco Giannini 2144 Gulf Gate Drive Sarasota, FL 34231
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] Sec/Treas 6/12/03 941-923-1752
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)