


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2003 8:00 am
Secretary of State

07-23-2003 90054 038 ***150.00

DOCUMENT # P02000125546

1. Entity Name
WHEEL 2 GO ORLANDO, INC.



Principal Place of Business
13048 WATERFORD WOOD CIRCLE, STE. 201
ORLANDO, FL 32828

Mailing Address
13048 WATERFORD WOOD CIRCLE, STE. 201
ORLANDO, FL 32828

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

6. Name and Address of Current Registered Agent

GONZALEZ, FANNY
13048 WATERFORD WOOD CIRCLE, STE. 201
ORLANDO, FL 32828

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 _____
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Amended UBR is \$81.25
Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME
D ANZOLA, CARLA
STREET ADDRESS 13048 WATERFORD WOOD CIRCLE, STE. 201
CITY-ST-ZIP ORLANDO, FL 32828

TITLE NAME
D ONORATO, YOLYMAR
STREET ADDRESS 13048 WATERFORD WOOD CIRCLE, STE. 201
CITY-ST-ZIP ORLANDO, FL 32828

TITLE NAME
D GONZALEZ, FANNY
STREET ADDRESS 13048 WATERFORD WOOD CIRCLE, STE. 201
CITY-ST-ZIP ORLANDO, FL 32828

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

90145842

03-0494958

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

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **03-0494958**

Applied For
Not Applicable

7. Name and Address of New Registered Agent

Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
City _____ FL Zip Code _____

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE NAME
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CITY-ST-ZIP

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

CR2E034 (10/02)

Attachment

90145842
#P0200012554/6


July 16, 2003

Florida Department of State
Division of Corporation
P.O. Box 1500
Tallahassee, Florida 32302-1500

Dear: Sirs

Enclosed you'll find check issue to you in the amount of \$150.00. You'll also find a copy of the completed 2003 Uniform Business report for our company. We are sending you this payment and at the same time voice our apology to you for not having it paid sooner. We started our business this past year and incorporated on November 26, 2002. It came as quite a shock and surprise to us that we had to pay \$150.00 for the renewal of our company since we never received any letter or information from you. Please note our new address and other information you require. Please accept the enclosed and adjust the records accordingly. Should you have any question, you may give me a call at 407-694-0101. Thank you.

Sincerely,



Fanny Gonzalez
Director

Wheels To Go Orlando, Inc.
Doc# P02000125546