

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P02000134987**

1. Entry Name

CARPELLI'S Image Gallery, INC

FILED

03 OCT -9 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2644 N. OBT

3. Mailing Address
2644 N. OBT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Kissimmee FL

City & State
Kissimmee FL

4. FEI Number
02-0657615

Applied For
Not Applicable

Zip
34744

Country

Zip
34744

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
PABLO MARTINEZ

Street Address (P.O. Box Number is Not Acceptable)
2644 N. OBT

Kissimmee FL

City
Kissimmee

FL

Zip Code
34744

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reissuing)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT LUZ MARINA GOMEZ 2644 N. OBT Kissimmee, FL 34744
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VICE PRESIDENT OCTAVIO GOMEZ 2644 N. OBT Kissimmee, FL 34744
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF NOMINEE OFFICER OR DIRECTOR

9/24/03

Date

Daytime Phone #

CR2E034B (12/01)

BUSINESS SUPPORT & CONSULTING GROUP, INC.

September 24, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Carpelli's Image Gallery, Inc.

Gentleman:

We are the accountants for Carpelli's Image Gallery, Inc. Attached please find the Corporation UBR. Please know that we never received a UBR for 2003. As a result this corporation became inactive. We request that the corporation be reissued and that you accept the enclosed check for \$150.00. The additional penalties should be waived since we never received the UBR and just now became aware of the inactive status of our company. These are obviously events beyond our control.

Your anticipated cooperation is most appreciated.

Cordially,


Tony Pestano, CFE

7758 NW 44 St.
Sunrise, FL 33351
Tel. 954/578-0016 954/578-0711
tonypestano@earthlink.net