


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008 08:00 AM
Secretary of State

| | | |
|--|--|---|
| DOCUMENT # P03000029978 | |  |
| 1. Entity Name BENINCASA LAW FIRM, P.A. | | |
| Principal Place of Business 1946 16 AVE VERO BEACH, FL 32960 | Mailing Address 1946 16 AVE VERO BEACH, FL 32960 | |

DO NOT WRITE IN THIS SPACE

02192008 No Chg-P CR2E034 (11/05)

| | |
|------------------------------------|--|
| 4. FEI Number 30-0161170 | Applied For <input type="checkbox"/> Not Applicable |
|------------------------------------|--|

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

6. Name and Address of Current Registered Agent

**BENINCASA, V.J (JIMMY)
1946 16 AVE
VERO BEACH, FL 32960**

**DO NOT WRITE
IN THIS SPACE**

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, 2008 Fee will be \$550.00**

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 | P BENINCASA, V.J (JIMMY) 1946 16 AVE VERO BEACH, FL 32960 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V BENINCASA, DEIDAD 1946 16 AVE VERO BEACH, FL 32960 |
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03/20/08-80003-016 150.00

**DO NOT WRITE
IN THIS SPACE**

12: I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

V.J (Jimmy) BENINCASA

3-3-08

Date

(772) 299-4511

Daytime Phone #