## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000016773  1. Entity Name PHILIP J. VIMINI, INC.					Secretary of State 02-14-2002 90015 018 ***150.00					
Principal Place of Business  8751 GATE HOUSE RD.  \$77  PLANTATION FL 33324  Mailing Address  8751 GATE HOUSE RD.  \$7  PLANTATION FL 33324										
2. Principal P 1569 Suite, Apt.	Place of Business  NW 121 PR #, etc.	3. Mailing Address 1569 WW 12 DR Suite, Apt. #, etc.		•	DO NOT WRITE IN THIS SPACE					
City & Stat	1 Springs Fl.	City & State CORAL SPRINGS F1.		4.	FEI Number 59	-3166546		No	plied For t Applicable	
330	6. Name and Address of Current Re	3307/	Country USA		Certificate of Statu		Fee F	75 Add Required		
VIMINI, PHILLIP J 8751 GATEHOUSE ROAD, #7 PLANTATION FL 33324				Street Address (P.O. Box Number is Not Acceptable)  1569 NW   A   DR  City CORA   SPRINGS FL Zip Code 3307/						
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 title if applicable. (NOTE Register & Application for the purpose of changing its registered agent, or both, in the State of Florida.  DATE										
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)    FILE NOW!!! FE After May 1, 2002 Fe Make Check Payable to			2 Fee will be \$5	50.00	10. Election Ca Trust Fund	ampaign Fina Contribution			May Be to Fees	
11.	OFFICERS AND DI	RECTORS	12.	Α[	DDITIONS/CHANG	ES TO OFFI	CERS AND DIRE	CTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VIMINI, PHILIP J 78751 GATE HOUSE RD.,#7 PLANTATION FL 33324	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		UW-IZI SPRINGS	DR. Fl.	<b>™</b> 33071	Change	Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete .	-TITLE NAME STREET ADDRESS CITY-ST-ZIP				۵ 🗀 🗓 پیست	change	Addition	
indicated of the cor	pertify that the information supplied with the on this report or supplemental report is triporation or the receiver or trustee empower or on an attachment with an address, with	ue and accurate and that me ered to execute this report a	v signatuře shall ha	ive the same	legal effect as if m	ade under oa	ath: that I am an	officer -	or director	