2002 UNIFORM BUSINESS REPORT (UBR)

Apr 24, 2002 8:00 am & Secretary of State P93000037710 DOCUMENT # 1. Entity Name RUGGIERO ENTERPRISES, INC. Principal Place of Business Mailing Address 5206 17TH AVENUE WEST 5513 MANATEE AVE., W \mathbf{v} **BRADENTON FL 34209 BRADENTON FL 34209** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0421311 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RUGGIERO, RUSSELL E Street Address (P.O. Box Number is Not Acceptable) 5205 17TH AVENUE WEST **BRADENTON FL 34209** City Zip Code 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: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. TITLE ☐ Change Addition ☐ Delete TITLE RUGGIERO, RUSSELL E NAME NAME 5206 17TH, AVENUE WEST STREET ADDRESS STREET ADDRESS **BRADENTON FL 34209** CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE RUGGIERO, FRED F NAME NAME STREET ADDRESS 5206 17TH AVENUE WEST STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34209** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME RUGGIERO, ISABEL A NAME STREET ADDRESS 5206 17TH AVENUE WEST STREET ADDRESS, **BRADENTON FL 34209** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

RED F RUGGIERO 4/12/02 (941)794-1102