

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000055910

1. Entity Name

BALITA NATIN, INC.

FILED

Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90136 036 ***150.00

Principal Place of Business

16409 ASHWOOD DRIVE
TAMPA FL 33624-1152

Mailing Address

16409 ASHWOOD DRIVE
TAMPA FL 33624-1152

80042542



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3199631

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUELO, ROBERTO R
16409 ASHWOOD DRIVE
TAMPA FL 33624

Name

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

City

FL

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)

DATE

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D	FELIX, ANDRES A	3029 OAK COVE DRIVE CLEARWATER FL 34619	
	D	BARLAAN, ARTHUR S	3506 COUNTRY CREEK LANE VALRICO FL 33594	
	D	OLAYTA, PONCIANO JR	21 PINWOOD AVE CLEARWATER FL 34625	
	D	AQUINO, REYNATO S	2141 WATER OAK DR N CLEARWATER FL 34624	
	D	BAUTISTA, LUCITA F	9720 94TH ST N SEMINOLE FL 34647	
	D	VILLAGOMEZA, LIWLIWA	1119 DOCKSIDE DR LUTZ FL 33549	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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 another like employee.

SIGNATURE:

ROBERTO R RUELO, DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-24-01 (813) 2748806

CR2E034 (10/00)