

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 03, 2002 8:00 am**  
**Secretary of State**

0255292 AV

**DOCUMENT # P93000064761**

**1. Entity Name**  
**TUNA'S HOLDING COMPANY, INC.**

02-03-2002 90004 050 \*\*\*150.00

**Principal Place of Business**  
**17201 BISCAYNE BLVD.**  
**NORTH MIAMI BEACH FL 33160**

**Mailing Address**  
**17201 BISCAYNE BLVD.**  
**NORTH MIAMI BEACH FL 33160**



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number** **65-0448636**

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**

**MCNEW, HUGH D**  
**3361 N.E. 170TH ST.**  
**NORTH MIAMI BEACH FL 33160**

Name **CHARLES PAOLINO**  
 Street Address (P.O. Box Number is Not Acceptable) **4621 LITTLE PALM LAKE**  
 City **COCONUT CREEK** **FL** Zip Code **33073**

**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** *Charles Paolino* **VP**

**DATE** **1-17-02**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**

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

**11. OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **DP** ☐ Delete  
**NAME** **BECK, JOHN W**  
**STREET ADDRESS** **17201 BISCAYNE BLVD.**  
**CITY-ST-ZIP** **NORTH MIAMI BEACH FL 33160**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** **VPT** ☐ Delete  
**NAME** **PAOLINO, CHARLES**  
**STREET ADDRESS** **17201 BISCAYNE BLVD.**  
**CITY-ST-ZIP** **NORTH MIAMI BEACH FL 33160**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
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**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**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.**

**SIGNATURE:** *Charles Paolino* **REQUIRED**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**DATE** **1-17-02**

**DAYTIME PHONE #** **305 945-2567**

CR2E034 (9/01)