

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90107 001 ***158.75

DOCUMENT # P93000066601

1. Entity Name

VIA-CON FINANZ & CONSULTING CO.

Principal Place of Business

Mailing Address

27280 LAKEWAY CT.
BONITA SPRINGS FL 33923

WALDSTRASSE 88
BERLIN, GERMANY 13156

2. Principal Place of Business

760 Tarpon Cove Drive

3. Mailing Address

760 Tarpon Cove Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

* 102

* 102

City & State

Naples, FL

City & State

Naples, FL

Zip

Country

Zip

Country

34110

34110

4. FEI Number

65-0490608

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAYS, KALEYTA
27280 LAKEWAY CT.
BONITA SPRINGS FL 33923

Name

Hans KALEYTA

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

760 Tarpon Cove Dr. * 102

City

Naples

FL

Zip Code

34110

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

Hans KALEYTA

Kaleyta

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, 2000 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
PTD
DOMENICO, KALEYTA
27280 LAKEWAY CT.
BONITA SPRINGS FL 33923 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
Domenico, KALEYTA
760 Tarpon Cove Dr. * 102
Naples, FL. 34110 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
KALEYTA, HANS
27280 LAKEWAY CT
BONITA SPRINGS FL 33923 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
Hans KALEYTA
760 Tarpon Cove Dr. * 102
Naples, FL. 34110 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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 all other like empowered.

SIGNATURE:

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

03-21-00

Date

941-5936865

Daytime Phone #