## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 14, 2001 08:00 AM DOCUMENT # **P9400079698** Entity Name **Secretary of State** PALMANO INNOVATIVE PRODUCTS INCORPORATED Principal Place of Business Mailing Address 7749 WHITEBRIDGE GLEN 7749 WHITEBRIDGE GLEN UNIVERSITY PARK FL UNIVERSITY PARK FL34201 34201 2. Principal Place of Business 3. Mailing Address 6505 FAIRWAY HILL CT. 6505 FAIRWAY HILL CT. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For ORLANDO FL ORLANDO 59-3285456 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 32835 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PALMANO RICHARD PALMANO RICHARD 7749 WHITEBRIDGE GLEN Street Address (P.O. Box Number is Not Acceptable) 6505 FAIRWAY HILL CT. UNIVERSITY PARK FL34201 City Zip Code ORLANDO 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. 04/14/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CEO TITLE ☐ Delete TITLE ☐ Addition X Change RICHARD MAME PALMANO RICHARD NAME PALMANO 7749 WHITEBRIDGE GLEN STREET ADDRESS 6505 FAIRWAY HILL CT. STREET ADDRESS CITY-ST-ZIP BRADENTON FL 34201 CITY-ST-ZIP ORLANDO 32835 ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Сhапде Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition 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. Richard S Palmano SIGNATURE: \_ 04/14/2001

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)