

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000004923

1. Entity Name

RANIERI OF AMERICA CORPORATION

**FILED**  
**Apr 12, 2000 8:00 am**  
**Secretary of State**

04-12-2000 90161 040 \*\*\*150.00

Principal Place of Business

21558 ST ANDREWS GRAND CIRCLE  
BOCA RATON FL 33486-8670  
US

Mailing Address

21558 ST ANDREWS GRAND CIRCLE  
BOCA RATON FL 33486-8670  
US

2. Principal Place of Business

19239 SKYRIDGE CIRCLE

3. Mailing Address

19239 SKYRIDGE CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton FL

City & State

Boca Raton FL

Zip

Country

33498-6210

Zip

Country

4. FEI Number

65-0547807

Applied For

Not Applicable

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

DE RANIERI, SONIA REGINA  
21558 ST. ANDREWS GRAND CIRCLE  
BOCA RATON FL 33486-8670

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, 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 PD  
NAME DE RANIERI, SONIA R  
STREET ADDRESS 21558 ST ANDREWS GRAND CIRCLE  
CITY-ST-ZIP BOCA RATON FL ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME 19239 SKYRIDGE CIRCLE  
STREET ADDRESS Boca Raton FL 33498  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD  
NAME DE RANIERI, MARCUS V  
STREET ADDRESS 21558 ST ANDREWS GRAND CIRCLE  
CITY-ST-ZIP BOCA RATON FL ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME 19239 SKYRIDGE CIRCLE  
STREET ADDRESS Boca Raton FL 33498  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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  
STREET ADDRESS  
CITY-ST-ZIP

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

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: Sonia R. De Ranieri  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 262-2023

(561) 883-8511

4/6/00