

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P95000011374**

1. Entity Name

Paul The Dentman Inc.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 SEP 30 PM 2:23

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1843 Barn Owl Way

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Palm Harbor

City & State

FLORIDA

City & State

Palm Harbor FL

Zip

34683

Country

U.S.A.

Zip

34683

Country

U.S.A.

DO NOT WRITE IN THIS SPACE

59-3294558

FEI Number

P95000011374

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Paul Paretti

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

1843 Barn Owl Way

City

Palm Harbor

FL

Zip Code

34683

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Paul Paretti

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

7-7-04

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|-----------------------------------|
| TITLE | <i>President</i> |
| NAME | <i>Paul Paretti</i> |
| STREET ADDRESS | <i>1843 Barn Owl Way</i> |
| CITY-ST-ZIP | <i>Palm Harbor, FL 34683</i> |
| TITLE | <i>Treasurer</i> |
| NAME | <i>Tony Paretti</i> |
| STREET ADDRESS | <i>3505 Masters Drive</i> |
| CITY-ST-ZIP | <i>Colorado Springs, CO 80907</i> |
| TITLE | |
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500039065215
07/13/04--01058--005 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul Paretti

Paul Paretti

7-7-04

Date

727-515-3368

Daytime Phone #

CR2E034B (12/02)

2/2

8-16-04

To whom This may concern, My Corporation never recieved this annual report. I am Filing late because I never viewed it.
Please note that this has never been filed late in the past.
Thank you again
Paul Paretta
President
Paul the Dentman inc.
727 515 -3368

Ref. P95000011374

Paul Paretta

8-16-04

President.