

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 24, 2002 8:00 am**  
**Secretary of State**

05-24-2002 91281 029 \*\*\*150.00

**DOCUMENT # P95000058037**

**1. Entity Name**  
**PETER ANTHONY INTERNATIONAL, INC.**

**Principal Place of Business**

251 ROYAL PALM WAY  
 SIXTH FLOOR  
 PALM BEACH FL 33480

**Mailing Address**

1515 S. FLAGLER DR  
 # 501  
 WEST PALM BEACH  
 FLORIDA, 33401

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

FLORIDA

Zip

Country

Zip

Country

33401

**4. FEI Number**

65-0606313

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 MENDOZA, MARIO G III  
 251 ROYAL PALM WAY  
 SUITE 602  
 PALM BEACH FL 33480

Name

SUSAN WEINER

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

1515 S. FLAGLER DR #501

City

WEST PALM BEACH

FL

Zip Code

33401

**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

4/30/02

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

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**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**  
 Trust Fund Contribution.

☐

**\$5.00** May Be  
 Added to Fees

**11. OFFICERS AND DIRECTORS**

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

TITLE P D  
 NAME WEINER, SUSAN  
 STREET ADDRESS 1515 SOUTH FLAGLER DRIVE  
 CITY-ST-ZIP WEST PALM BEACH FL 33401

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VSTD  
 NAME ANTHONY, PETER  
 STREET ADDRESS 251 ROYAL PALM WAY  
 CITY-ST-ZIP PALM BEACH FL 33480

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

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TITLE  
 NAME  
 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:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/02 561 820 8836

CR2E034 (9/01)