

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90321 025 ***550.00

DOCUMENT # P95000088254

1. Entity Name
VINTAGE VENTURES, INC.

Principal Place of Business

117 N. THORNTON AVE.
 ORLANDO FL 32801
 US

Mailing Address

117 N. THORNTON AVE.
 ORLANDO FL 32801
 US

2. Principal Place of Business

117 N. Thornton Ave
 Suite, Apt. #, etc.

3. Mailing Address

117 N. Thornton Ave
 Suite, Apt. #, etc.

City & State

Orlando FL

City & State

Orlando FL

4. FEI Number

59-3343478

Applied For

Not Applicable

Zip

32801

Country

US

Zip

32801

Country

US

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

FARBER, KIM A
 117 N. THORNTON AVE.
 ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name

Farber, Kim A.

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

117 N. Thornton Ave.

City

Orlando

FL

Zip Code

32801

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, 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

TITLE PD
 NAME FARBER, KIM A
 STREET ADDRESS 117 N. THORNTON AVE.
 CITY-ST-ZIP ORLANDO FL 32801 ☐ Delete

TITLE T
 NAME FARBER, GARY V.
 STREET ADDRESS 117 N THORNTON AVE
 CITY-ST-ZIP ORLANDO FL 32801 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
 NAME FARBER, KIM A.
 STREET ADDRESS 117 N. Thornton Ave
 CITY-ST-ZIP Orlando FL 32801 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

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:

GARY V. FARBER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-18-02

Date

386-226-3862

Daytime Phone #

CR2E034 (9/01)