

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State
 04-02-2001 90302 037 ***150.00

DOCUMENT # P95000097285

1. Entity Name
ROMANACH REALTY, INC.

Principal Place of Business

7345 SAND LAKE RD #409
 ORLANDO FL 32819
 US

Mailing Address

7345 SAND LAKE RD #409
 ORLANDO FL 32819
 US

2. Principal Place of Business

7345 Sand Lake Rd

3. Mailing Address

7345 Sand Lake Rd

Suite, Apt. #, etc.

Suite # 310

Suite, Apt. #, etc.

Suite # 310

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32819

Country

Orange

Zip

32819

Country

Orange



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3354275**

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

ROMANACH, FRANCISCO
 10020 N FULTON CT
 ORLANDO FL 32836

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, 2001 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	D	☐ Delete
NAME	ROMANACH, FRANCISCO	
STREET ADDRESS	10020 N FULTON CT	
CITY-ST-ZIP	ORLANDO FL 32836	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
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STREET ADDRESS		
CITY-ST-ZIP		

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

Francisco Romanach **Francisco Romanach**

Date

3/30/01

Daytime Phone #

(407) 352-2114

CR2E034 (10/00)