

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000003593

1. Entity Name

A PAWN WEST, INC.

**FILED**  
Feb 08, 2001 8:00 am  
Secretary of State

02-08-2001 90381 014 \*\*\*150.00

Principal Place of Business

A-PAWN WEST  
6706 CENTRAL AVE  
ST. PETERSBURG FL 33707  
US

Mailing Address

A-PAWN WEST  
6706 CENTRAL AVE  
ST. PETERSBURG FL 33707  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3360899

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

RAMETTA, NICOLA  
4500 78TH AVENUE NORTH  
PINELLAS PARK FL 33781

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 file 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 P  
NAME RAMETTA, NICOLA C  
STREET ADDRESS 4500 78TH AVE N.  
CITY-ST-ZIP PINELLAS PARK FL

☐ Change ☐ Addition

TITLE VP  
NAME RAMETTA, JOSEPHINE  
STREET ADDRESS 4500 78 AVE N  
CITY-ST-ZIP PINELLAS PARK FL 33781

☐ 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:

*Josephine Rametta* Josephine Rametta

1-12-01

Date

Daytime Phone #

CR2E034 (10/00)