

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 04, 2001 8:00 am
Secretary of State

05-04-2001 90114 029 ***150.00

DOCUMENT # P96000033076

1. Entity Name

MADE IN THE SHADE MARINE CANVAS, INC.

Principal Place of Business

908800 US 1
BOX 5
TAVERIVIER FL 33070

Mailing Address

908800 US 1
BOX 5
TAVERIVIER FL 33070

2. Principal Place of Business

98990 US 1

3. Mailing Address

98990 US 1

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

KEY LARGO FLA.

City & State

KEY LARGO FLA.

4. FEI Number

65-0658236

Applied For

Not Applicable

Zip

Country

33037 USA

Zip

Country

33037 USA

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

MICCICHE, FRANCO N
95480 US 1
KEY LARGO FL 33037

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
MICCICHE, FRANCO N
95480 US 1
KEY LARGO FL 33037 ☐ Delete

TITLE
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☐ 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:

Franco Micciche **FRANCO Micciche** 4-26-01 1-305-852-8520

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)