## 2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # **P96000038732** May 01, 2000 8:00 am Secretary of State STREET EAGLE OF PINELLAS COUNTY, INC. 05-01-2000 90384 001 \*\*\*150.00 Principal Place of Business Mailing Address 12505 66TH ST N 12505 66TH ST N LARGO FL 33773 LARGO FL 33773-3440 2. Principal Place of Business 3. Mailing Address 100 Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE SUITE Applied For City & State 4. FEI Number 59-3375930 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPOTO, ROBERT 12505 66TH ST., N **LARGO FL 33773** , in the State of Florida. 8. The above named entity submits this statement for the purpose of changing its registered office FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **PSTD** ☐ Change Addition Delete TITLE TITLE SPOTO, ROBERT A NAME NAME . 3 STREET ADDRESS 11492 60TH TER., N STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SEMINOLE FL 33772 ☐ Addition ☐ Change Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 ERT SPOTO 4-12-00

SIGNATURE: