

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2002 8:00 am
Secretary of State

04-26-2002 90009 018 ***150.00

DOCUMENT # P96000077858

1. Entity Name

ALBARELLA INVESTMENTS INC.

Principal Place of Business

**2276 GLEN RIDGE DR
 SPRING HILL FL 34609**

Mailing Address

**2276 GLEN RIDGE DR
 SPRING HILL FL 34609**

2. Principal Place of Business

436 Lorenzo DR

3. Mailing Address

436 Lorenzo DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Spring Hill FL

City & State

Spring Hill FL

Zip

34609

Country

Hernando

Zip

34609

Country

Hernando

4. FEI Number

59-3421160

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**ALBARELLA, JOSEPH A
 13080 ROSEANNA DRIVE
 SPRING HILL FL 34609**

7. Name and Address of New Registered Agent

Name

ALBARELLA, Joseph A.

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

436 Lorenzo DR

City

Spring Hill

FL

Zip Code

34609

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

Joseph A. Albarella **Joseph A. ALBARELLA** **4/15/02**

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 **VTS** ☐ Delete
 NAME **ALBARELLA, JUDITH I**
 STREET ADDRESS **13080 ROSEANNA DR**
 CITY-ST-ZIP **SPRING HILL FL 34609**

TITLE **P** ☐ Delete
 NAME **ALBARELLA, JOSEPH**
 STREET ADDRESS **13080 ROSEANNA DR**
 CITY-ST-ZIP **SPRING HILL FL 34609**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **436 Lorenzo DR**
 CITY-ST-ZIP **Spring Hill FL. 34609**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **436 Lorenzo DR**
 CITY-ST-ZIP

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

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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:

Judith I Albarella **ALBARELLA** **4/15/02** **(352) 686 9802**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)