2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000104554

1. Entity Name

VINCENT MISTRETTA, JR., INC. R

FILED

00 JUL 27 AM 11:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07/19/2000 90152 018 $150.00

Principal Place of Business	Mailing Address
12164 NW 33RD STREET CORAL SPRINGS FL 33065 US	12164 NW 33RD STREET CORAL SPRINGS FL 33065 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 65-0723088 ~~NOT APPLICABLE~~ ☐ 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
MISTRETTA JR., VINCENT 12164 NW 33RD STREET CORAL SPRINGS FL 33065	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 X ______ 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 $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
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	PST MISTRETTA, VINCENT JR 12164 NW 33RD STREET CORAL SPRINGS FL 33065	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MISTRETTA, KELLY J 12164 NW 33RD STREET CORAL SPRINGS FL 33065	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: X Vincent Mistretta, Jr. 7/14/2000 (954) 803-1887

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT
P960001045S4
7/14/00

B010341

To whom it may concern,

I received the enclosed (UBR) on 7/12/00.

I never received a previous mailing from the State.

If you check my account you will see that I have paid the $15.00 annual fee every year on time.

I am requesting that the state wave the late fee due to the fact I never received any (UBR) until 7/12/00.

I am enclosing a check for the customary fee of $15.00.

If there is any problem please contact me A.S.A.P.

Thank you for your cooperation in this matter.

Sincerely,

Vincent Mistretta, Jr.