

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90180 038 ***150.00

DOCUMENT # P97000009831

1. Entity Name
GIANT OCTOPUS CORPORATION

Principal Place of Business
~~2708 ALT. 19 NORTH~~ **806 FRANKLIN ST**
~~SUITE 506~~ **CLEARWATER**
~~PALM HARBOR FL 34683~~ **FL**

Mailing Address
~~2708 ALT. 19 NORTH~~
~~SUITE 506~~
~~PALM HARBOR FL 34683~~



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
806 FRANKLIN ST
 Suite, Apt. #, etc.

3. Mailing Address
806 FRANKLIN ST
 Suite, Apt. #, etc.

City & State
CLEARWATER FL
 Zip **33756** Country **USA**

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CLEARWATER FL
 Zip **33756** Country **USA**

4. FEI Number **59-3427806**
 Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
RODRIGUEZ, REINALDO JR.
1306 RIVERSIDE DRIVE
TARPON SPRINGS FL 34689

7. Name and Address of New Registered Agent
 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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	RODRIGUEZ, REINALDO JR.	
STREET ADDRESS	1306 RIVERSIDE DRIVE	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	
TITLE	DV	<input type="checkbox"/> Delete
NAME	DIAL, RUTH A.	
STREET ADDRESS	2000 BRENT PLACE	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUEZ, REINALDO JR.	
STREET ADDRESS	480 E PARK DR	
CITY-ST-ZIP	LARGO, FL 33771	
TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUTH DIAL	
STREET ADDRESS	2886 ARMADILLO DR	
CITY-ST-ZIP	PALM HARBOR, FL 34683	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: **REINALDO RODRIGUEZ JR.** **2/27/02** **727.669-7400**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)