

AMENDED UBR  
FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

FILED

02 MAY 21 AM 11:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P97000043709

1. Entity Name

EASY Running INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

31326 S.R. 44

Suite, Apt. #, etc.

3. Mailing Address

34825 Marshall Road

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

EUSTIS Florida

City & State

EUSTIS Florida

4. FEI Number

59-3452964

Applied For

Not Applicable

Zip

32736

Country

USA

Zip

32736

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

DO NOT WRITE  
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name TERRY SQUILLANTE

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

34825 Marshall Road

City EUSTIS

FL

Zip Code 32736

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.

TERRY SQUILLANTE, PRES.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/9/02

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

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 PRES, V. PRES, SEC. TREAS & Director

NAME TERRY SQUILLANTE

STREET ADDRESS 34825 Marshall Road

CITY-ST-ZIP EUSTIS FL 32736

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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STREET ADDRESS

CITY-ST-ZIP

DO NOT WRITE  
IN THIS SPACE

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 on an attachment with an address, with another like empowered.

TERRY SQUILLANTE, PRES

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/9/02

DATE

352-589-8848

Daytime Phone #

CR2E034B (12/01)