

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90367 016 ***150.00

DOCUMENT # P97000071688

1. Entity Name

RSK VERO, INC.

Principal Place of Business

**4410 CASEY LAKE RD
TAMPA FL 33624**

Mailing Address

**4410 CASEY LAKE RD
TAMPA FL 33624**

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 **59-3465282**

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**PATEL, JAYESH D
4410 CASEY LAKE RD
TAMPA FL 33624**

7. Name and Address of New Registered Agent

Name **PATEL Dilip**
Street Address (P.O. Box Number is Not Acceptable)
2900 INTERNATIONAL SPDRY BLVD.
City **DAYTONA BEACH** FL Zip Code **32124**

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 **Dilip Patel** **DILIP PATEL**

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

(NOTE: Registered Agent signature required when reinstating)

3/20/02

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	PR	<input type="checkbox"/> Delete
NAME	PATEL, JAYESH	
STREET ADDRESS	4410 CASEY LAKE RD	
CITY-ST-ZIP	TAMPA FL 33624	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PATEL, DILIP	
STREET ADDRESS	8797 20TH STREET	
CITY-ST-ZIP	VERO BEACH FL 32966	
TITLE	0	<input type="checkbox"/> Delete
NAME	PATEL, RAVI	
STREET ADDRESS	4601 34TH STREET S.	
CITY-ST-ZIP	ST. PETERSBURG FL 32711	
TITLE	0	<input type="checkbox"/> Delete
NAME	PATEL, ARVIN D	
STREET ADDRESS	734 SOUTH DALE MABRY	
CITY-ST-ZIP	TAMPA FL 33609	
TITLE	0	<input type="checkbox"/> Delete
NAME	PATEL, RAMESH	
STREET ADDRESS	3314 S. DALE MABRY	
CITY-ST-ZIP	TAMPA FL 33609	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PATEL DILIP	
STREET ADDRESS	2900 INT'L SPDRY BLVD	
CITY-ST-ZIP	DAYTONA BEACH, FL 32124	
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: **JAYESH PATEL**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/02

Date

386-255-0541

Daytime Phone #

CR2E034 (9/01)