

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90158 009 ***150.00

0418150 AV

DOCUMENT # P97000102492

1. Entity Name
VETTUS FOUR, INC.

Principal Place of Business

**3008 LITTLE RD
VALRICO FL 33594**

Mailing Address

**3008 LITTLE RD
VALRICO FL 33594**

2. Principal Place of Business

1114 BURKLEY Rd

Suite, Apt. #, etc.

3. Mailing Address

1114 BURKLEY Rd

Suite, Apt. #, etc.

City & State

AUBURNDALE FL

Zip

33823

Country

City & State

AUBURNDALE FL

Zip

33823

Country

4. FEI Number

59-3481099

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**VETTUPAPAPUBTHU, CYRIAE
3008 LITTLE RD
VALRICO FL 33594**

7. Name and Address of New Registered Agent

Name

PHILIP JOY

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

213 REGAL PARK DR

City

VALRICO

FL

Zip Code

33594

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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☒ Delete
NAME **VETTUPAPAPURATHU, CYRIAC MATHEW**
STREET ADDRESS **3008 LITTLE RD**
CITY-ST-ZIP **VALRICO FL 33594**

TITLE **D** ☐ Delete
NAME **JOY, PHILIP PHILIP**
STREET ADDRESS **213 REGAL PK DR**
CITY-ST-ZIP **VALRICO FL 33594**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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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
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
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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:

JOY PHILIP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/02 (863) 967-7845

Date

Daytime Phone #

CR2E034 (9/01)