

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90444 049 ***150.00

030674 AV

DOCUMENT # P98000003985

1. Entity Name
JOHN A BELLAVIA, INC.



Principal Place of Business
**5632 NW 127TH TERRACE
CORAL SPRINGS FL 33076**

Mailing Address
**P.O. BOX 26565
TAMARAC FL 33320**



2. Principal Place of Business
7381 NW 115th Terrace
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Dickland, Florida
Zip
33076 Country
USA

City & State
Zip
Country

4. FEI Number
65-0801838

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

**BELLAVIA, JOHN
5632 NW 127TH TERRACE
CORAL SPRINGS FL 33076**

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

7381 NW 115th Terrace
City
Dickland FL Zip Code
33076

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **JOHN BELLAVIA**

DATE
2/29/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **BELLAVIA, JOHN A**
STREET ADDRESS **5632 NW 1127TH TERRACE**
CITY-ST-ZIP **CORAL SPRINGS FL 33076**

TITLE **P** ☒ Change ☐ Addition
NAME **JOHN A. BELLAVIA**
STREET ADDRESS **7381 NW 115th Terrace**
CITY-ST-ZIP **Dickland, FL 33076**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **JOHN A. BELLAVIA, Pres.**

DATE
2/29/03

DAYTIME PHONE #
954-753-0172

CR2E034 (10/02)