

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000016797

1. Entity Name

POWERSUPPLY, INC.

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90019 036 ***150.00

Principal Place of Business

Mailing Address

1140 HOLLAND DR #5
BOCA RATON FL 33487
US

1140 HOLLAND DR #5
BOCA RATON FL 33487
US

2. Principal Place of Business

3. Mailing Address

3595 N. DIXIE HWY

3595 N. DIXIE HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 7

SUITE 7

City & State

City & State

BOCA RATON, FL

BOCA RATON, FL

Zip

Country

Zip

Country

33431 Palm Beach

33431 - Palm Beach

4. FEI Number

65-0867458

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

7. Name and Address of New Registered Agent

ROLFE, MICHAEL
309 NW SPANISH RIVER BLVD
BOCA RATON FL 33431

Name

MIRCO VIETTI

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

3595 N. DIXIE HWY STE 7

City

BOCA RATON

FL

Zip Code

33431

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME VIETTI, MARCO MIRCO
STREET ADDRESS 3595 N. DIXIE HWY. #5
CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☒ Change ☐ Addition
NAME MIRCO VIETTI
STREET ADDRESS 3595 N. DIXIE HWY STE 7
CITY-ST-ZIP BOCA RATON, FL 33431

TITLE DV ☒ Delete
NAME VIETTI, FABIO
STREET ADDRESS VIA CARLO BERTOLAZZI
CITY-ST-ZIP LA STORTA.ROMA, ITALY 00123

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

TITLE M ☒ Delete
NAME ROLFE, MICHAEL
STREET ADDRESS 309 NW SPANISH RIVER BLVD
CITY-ST-ZIP BOCA RATON FL 33431

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)