2001 UNIFORM BUSINESS REPORT (UBR)

7/13/01 Page 1 of 2
Ck # 2079
550.00

FILED
01 OCT 29 PM 5:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted]

DOCUMENT # P98000019089

1. Entity Name
MONA LISA OF SANIBEL, INC.

Principal Place of Business	Mailing Address
2440 PALM RIDGE ROAD UNIT 1 AND 2 SANIBEL FL 33957	2440 PALM RIDGE ROAD UNIT 1 AND 2 SANIBEL FL 33957

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE
07/19/01 90005 012 550

4. FEI Number 65-0815059 — 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
~~HAVERLEY, VALLEE~~ ~~2440 PALM RIDGE ROAD UNIT~~ 1 AND 2 ~~SANIBEL FL 33957~~	Name: BOB TRIVETT Street Address (P.O. Box Number is Not Acceptable): 2440 PALM RIDGE ROAD UNIT 1 AND 2 SANIBEL, FLORIDA City: FL Zip Code: 33957

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: X Bob Trivett a 10/26/01
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 $550.00
After September 12, 2001 Fee will be $750.00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D TRIVETT, BOB 2440 PALM RIDGE ROAD UNIT 1 AND 2 SANIBEL FL 33957	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MESSING, HOWARD J DR 2440 PALM RIDGE ROAD UNIT 1 AND 2 SANIBEL FL 33957	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAVERLEY, VALLEE 2440 PALM RIDGE ROAD UNIT 1 AND 2 SANIBEL FL 33957	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 12 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 7/16/01 941-472-0494
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (6/00)

We Never received
Any correspondence
regarding the omission
of the Signature for
the New registered
Agent.
A copy of the 7/13/01
Cancelled check is Enclosed