

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000036331

1. Entity Name

THE PALMIERI COMPANIES, INC.

Principal Place of Business
275 EAST OAKLAND PARK BLVD
FORT LAUDERDALE FL 33334

Mailing Address
POST OFFICE BOX 31358
PALM BEACH FL 33420

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 65-0833400

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

CRUCE, LINDA
275 E. OAKLAND PK BLVD
FT LAUDERDALE FL 33334

Name

Street Address (P.O. Box Number is Not Acceptable)
3652 N Andrews Avenue

City
Ft. Lauderdale

FL

Zip Code
33309

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, 2001 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
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
PALMIERI, LISA
275 EAST OAKLAND PARK BLVD
FORT LAUDERDALE FL 33334 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3652 N Andrews Avenue
Ft. Lauderdale, FL 33309 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
BLOCK, MICHAEL
275 EAST OAKLAND PARK BLVD
FORT LAUDERDALE FL 33334 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3652 N Andrews Avenue
Ft. Lauderdale, FL 33309 ☒ Change ☐ Addition

TITLE
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STREET ADDRESS
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D
CRUCE, LINDA
275 EAST OAKLAND PARK BLVD
FORT LAUDERDALE FL 33334 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3652 N Andrews Avenue
Ft. Lauderdale, FL 33309 ☒ Change ☐ Addition

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☐ Delete

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

SIGNATURE:

Linda Cruce

Linda Cruce

3/27/01

561-743-3227

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0510055

CR2E034 (10/00)

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90097 014 ***150.00

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DO NOT WRITE IN THIS SPACE