

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2003 8:00 am
Secretary of State

08-29-2003 90158 001 ***150.00
08-29-2003 90158 002 ***400.00

DOCUMENT # P98000037317

1. Entity Name
BUSCIGLIO CONSTRUCITON, INC.



Principal Place of Business
**13445 SE 157TH LANE
WEIRSDALE FL 32195**

Mailing Address
**13445 SE 157TH LANE
WEIRSDALE FL 32195**

2. Principal Place of Business
15 TOMOKA PLACE
Suite, Apt. #, etc.

3. Mailing Address
15 TOMOKA PLACE
Suite, Apt. #, etc.

City & State
SUMMERFIELD, FL
Zip
34491 Country
USA

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SUMMERFIELD, FL
Zip
34491 Country
USA

4. FEI Number **59-3509490**

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

BUSCIGLIO, JOHNNY II
13445 SW 157 LANE
WEIRSDALE FL 32195

Name
BUSCIGLIO, JOHNNY II
Street Address (P.O. Box Number is Not Acceptable)
15 TOMOKA PLACE
City **SUMMERFIELD** FL Zip Code **34491**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BUSCIGLIO, JOHNNY
13445 SE 157TH LANE
WEIRSDALE FL 32195** ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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: **JOHNNY II BUSCIGLIO** **08-25-03 352-454-6910**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

Attachment 55055355
#P98000087817

To Whom It May Concern:

During the course of the past year I was going through a divorce. My X Wife, who was also the company bookkeeper, remained in the residence and I moved to another location. During this time the company mail was not forwarded to me, therefore I did not receive the UBR notification. Due to the circumstances I respectfully request that you waive the penalty. I appreciate your understanding in this situation.

Regards,



Johnny Busciglio II
352-454-6910