

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2001 8:00 am
Secretary of State

03-09-2001 90500 018 ***150.00

DOCUMENT # P98000042709

1. Entity Name

REPETTI ENTERPRISES, INC.

Principal Place of Business

**2121 STEEPLECHASE LANE
 PALM HARBOR FL 34684**

Mailing Address

**2121 STEEPLECHASE LANE
 PALM HARBOR FL 34684**

2. Principal Place of Business

211 Steeplechase La.

3. Mailing Address

211 Steeplechase La.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

Palm Harbor, FL

Palm Harbor, FL

4. FEI Number **65-0835183**

Applied For
 Not Applicable

Zip

Country

34684

Pinellas

Zip

Country

34684

Pinellas

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

**REPETTI, GARY J
 2121 STEEPLECHASE LANE
 PALM HARBOR FL 34684**

Name

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

211 Steeplechase La.

City

Palm Harbor

FL

Zip Code

34684

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 **PSTD** ☐ Delete
 NAME **REPETTI, GARY J**
 STREET ADDRESS **2121 STEEPLECHASE LANE**
 CITY-ST-ZIP **PALM HARBOR FL 34684**

TITLE ☒ Change ☐ Addition
 NAME **211 Steeplechase Lane**
 STREET ADDRESS **Palm Harbor, FL 34684**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **Secretary/Treasurer**
 STREET ADDRESS **Joanne C. Repetti**
 CITY-ST-ZIP **211 Steeplechase La.**
Palm Harbor, FL 34684

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

Gary J Repetti

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/01

Date

727 771-8424

Daytime Phone #

CR2E034 (10/00)