## 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000042839 1. Entity Name MENNITTO & ASSOCIATES, INC. Principal Place of Business Mailing Address

## FILED Mar 01, 2001 8:00 am Secretary of State 02-15-2001 90013 010 \*\*\*150.00

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28 WINDSOR LA PALM BEACH G	ane Vardens fl 33418		28 WINDSOR LANE PALM BEACH GARDENS FL	33418			. '		. <i>ผ</i> เบรีย		
		<u>.</u>			•					111 TO 1 110	
2. Principal Place of Business		, ];	1 3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State				4. FEI Number 65-0838670 Applied For				
Zip Country			Zip	Coun	ountry		. Certificate of Status Desire		\$8.75 Ad		
<del></del>	6. Name and Address of Cur	rent Rec	stered Agent	,			. Name and Address of Ne		Fee Require	ed	
	G. Haline also Addings of Oct.	101111103	nation Again		Name	•	. Home the Medicas of the	w inglowine	-go		
MENNITTO, ANTHONY 28 WINDSOR LANE					Street Add	tress (P.O	P.O. Box Number is Not Acceptable)				
	INDSUK LANE BEÄCH GARDENS FL 33418	3						<del> </del>			
					City			FL	Zip Cod	le	
8. The above	named entity submits this stateme	ent for the	purpose of changing its	registere	d office or re	egistered a	agent, or both, in the State of		_ P	_	
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.  FILE NOW After MAY 1, 2						)	n reinstating)  10. Election Campaign Trust Fund Contrib			May Be	
(See criteria	a on back)		Make Check Payab	e to De	partment o	of State	Trast Fund Continu	U11071. C	AUCE	J W Fees	
11.	OFFICERS A	AND DIR		12.			ADDITIONS/CHANGES TO	OFFICERS AND			
STREET ADDRESS	P MENNITTO, ANTHONY 28 WINDSOR LANE	_ \	□ Delete		NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition	
TITLE	PLM BCH GARDEN FL 3341	8.	☐ Delete	TITLE					Change	☐ Addition	
NAME STREET ADDRESS				NAME	T ADDRESS						
CITY-ST-ZIP				CITY-	ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Deiete	ł					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS			☐ Delete	TITLE NAME STREE				•	Change	Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS		•	Delete	TITLE NAME STREE	T ADORESS				☐ Change	Addition	
TITLE  WANE  STREET ADDRESS  STY-ST-ZIP	,		☐ Defete	TITLE NAME	T ADDRESS ST-ZIP				Change	Addition	
I3. I hereby ca indicated o of the corpo	ertify that the information supplied in this report or supplemental reporation or the receiver or trustee erron an attachment with an address.	ori is true	and accurate and that my ed to execute this report a	he exem signatu s require	ption stated ire shall have ed by Chapte	the same or 607, Flo	e legal effect as if made und	er oath; that I ar ame appears in	n an officer Block 11 or	or director Block 12 if	