

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000063285

Entity Name
X4'S & MORE, INC.

FILED
Apr 09, 2002 8:00 am
Secretary of State

02-20-2002 90072 006 ***158.75

Principal Place of Business
7035 PHILLIPS HWY
JACKSONVILLE FL 32216-32258
6376 Greenland Road

Mailing Address
1479 LEE RD
JACKSONVILLE FL 32259

Principal Place of Business
6376 Greenland Road
Suite 1

3. Mailing Address
Suite, Apt. #, etc.

City & State
Jacksonville, FL
Zip
32258

City & State
Switzerland
Zip
USA

4. FEI Number
59-3522232

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CATANZARO, DONALD R
7035 PHILLIPS HWY
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name Donald R. Catanzaro
Street Address (P.O. Box Number is Not Acceptable)
6376 Greenland Rd
City Jacksonville FL Zip Code 32258

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 Alisa Catanzaro Donald Catanzaro 2/7/02
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, 2002 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

| | | |
|----------------|-----------------------|---------------------------------|
| TITLE | P | <input type="checkbox"/> Delete |
| NAME | CATANZARO, DONALD | |
| STREET ADDRESS | 7035 PHILLIPS HWY | |
| CITY-ST-ZIP | JACKSONVILLE FL 32216 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | CATANZARO, ALISA | |
| STREET ADDRESS | 1479 LEE RD | |
| CITY-ST-ZIP | SWITZERLAND FL 32259 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|--------------------------------|--|
| TITLE | President | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Donald Catanzaro | |
| STREET ADDRESS | 6376 Greenland Road | |
| CITY-ST-ZIP | Suite 1 Jacksonville, FL 32258 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> 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: Alisa Catanzaro JIRE Vice president 2/7/02 904281 1033
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)