

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 05, 2002 8:00 am**  
**Secretary of State**

08-05-2002 90008 017 \*\*\*150.00

**DOCUMENT # P98000067349**

1. Entity Name  
**MARY E. LOBIANCO, INC.**

Principal Place of Business  
**2802 KELLEY BROOKE LANE  
DEERFIELD BEACH FL 33442**

Mailing Address  
**2802 KELLEY BROOKE LANE  
DEERFIELD BEACH FL 33442**

**972734**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0854254**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**LOBIANCO, MARY E  
2802 KELLEY BROOKE LANE  
DEERFIELD BEACH FL 33442**

Name

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

City

**FL**

Zip Code

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

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 \$550.00  
After September 13, 2002 Fee will be \$750.00  
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	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<b>D</b>	<b>LOBIANCO, MARY E</b>	<b>2802 KELLEY BROOKE LANE</b>	<b>DEERFIELD BEACH FL 33442</b>	<input type="checkbox"/> Delete				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition

CR2E034 (4/02)

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:

**MARY E. LOBIANCO**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**7/31/02**

**561 391 9091**

Attachment

972734  
#P98000067349

July 22, 2002

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: FEI # 65-0854254 Mary E. Lobianco, Inc.

To whom it may concern:

Recently, we received the 2002 Uniform Business Report from the Department of State stating that Mary E. Lobianco, Inc. owes \$550.00 for the annual filing fee. Our office never received the initial UBR filing form, which was probably mailed earlier in the year.

We are respectfully requesting that your office waive the reinstatement fee. Enclosed please find the 2002 UBR form along with a check in the amount of \$150.00 for the yearly registration fee.

Thank you for your consideration in this matter.

Sincerely,



Mary E. Lobianco  
Registered Agent