FILED

CR2E034 (9/01)

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 27, 2002 8:00 am P98000080245 **Secretary of State** DOCUMENT # 1. Entity Name 02-27-2002 90313 044 \*\*\*150.00 VERONA REALTY CORP. Principal Place of Business Mailing Address 809 SOUTH RIVERSIDE DRIVE 1001 S RIVERSIDE DR POMPANO BEACH FL 33062 POMPANO BEACH FL 33062 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0868661 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name . ي. الم<del>حد</del> م COLANGELO, ANTHONY Street Address (P.O. Box Number is Not Acceptable) 809 SOUTH RIVERSIDE DRIVE POMPANO BEACH FL 33062 City 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. 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 \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 \$1. 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition COLANGELO, JOHN NAME NAME 809 SOUTH RIVERSIDE DRIVE *<u>ATREET ADDRESS</u>* STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP CITY-ST-ZIP **VPSD** Change ☐ Addition TITLE Delete TITLE COLANGELO, ANTHONY NAME NAME 809 SOUTH RIVERSIDE DRIVE STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP CITY-ST-ZIP TD TITLE TITLE Change Addition COLANGELO, JOHN JR NAME NAME 809 SOUTH RIVERSIDE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33062 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITI F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE:

changed, or on an attachment with an add