

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000080639

1. Entity Name
DA GIORGIO, INC.

Principal Place of Business
5702 MARINA DR
HOLMES BEACH FL 34217

Mailing Address
5702 MARINA DR
HOLMES BEACH FL 34217

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0863802

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

OLDANO, GIORGIO G
9111 KINGSTON RD
BRADENTON FL 34210

7. Name and Address of New Registered Agent

Name
OLDANO, GIORGIO G.
Street Address (P.O. Box Number is Not Acceptable)
5116 39th Street West
City Bradenton FL Zip Code 34210

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 \$550.00
After September 12, 2001 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

TITLE	P	<input type="checkbox"/> Delete
NAME	OLDANO, GIORGIO G	
STREET ADDRESS	9111 KINGSTON RD	
CITY-ST-ZIP	BRADENTON FL 34210	
TITLE	V	<input type="checkbox"/> Delete
NAME	OLDANO, GLADYS	
STREET ADDRESS	9111 KINGSTON RD	
CITY-ST-ZIP	BRADENTON FL 34210	
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	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OLDANO, GIORGIO G.	
STREET ADDRESS	5116 39th Street West	
CITY-ST-ZIP	Bradenton, FL 34210	
TITLE	V	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OLDANO, GLADYS	
STREET ADDRESS	5116 39th Street West	
CITY-ST-ZIP	Bradenton, FL 34210	
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:

Signature of GIORGIO OLDANO - GIORGIO OLDANO 8-29/01 (941-779-0220)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0126164 A1

CR2E034 (5/01)