

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000087201

1. Entity Name

PYRAM ENTERPRISES, INC.

FILED
Jan 24, 2001 8:00 am
Secretary of State

01-24-2001 90062 009 ***150.00

Principal Place of Business

2111 N.E. 42ND COURT
UNIT 104-W
LIGHTHOUSE POINT FL 33064

Mailing Address

2111 N.E. 42ND COURT
UNIT 104-W
LIGHTHOUSE POINT FL 33064

902040



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 65-0869734

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

CITRANO, FRANK J
~~3900 N.E. 17TH AVENUE #1403~~
~~POMPANO BEACH FL 33064~~

Name **FRANK J. CITRANO**

Street Address (P.O. Box Number is Not Acceptable)
2111 NE 30th STREET

City **LIGHTHOUSE POINT**

FL

Zip Code **33064**

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 \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **RIZZO, JOHN**
STREET ADDRESS **2111 NE 42ND STREET UNIT 104W**
CITY-ST-ZIP **LIGHTHOUSE POINT FL 33064**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

John Rizzo **JOHN RIZZO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(954) 781-2342

Daytime Phone #

CR2E034 (10/00)