

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 17, 2001 8:00 am**  
**Secretary of State**

07-17-2001 90093 011 \*\*\*550.00

0121971 AT

**DOCUMENT # P98000092329**

1. Entity Name  
**RICHARD A. CARTAGENA, INC.**

Principal Place of Business  
**2643 SADDLEWOOD LANE**  
**PALM HARBOR FL 34685**

Mailing Address  
**2643 SADDLEWOOD LANE**  
**PALM HARBOR FL 34685**

**A0078240**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**2495 Enterprise Road**

3. Mailing Address  
**2495 Enterprise Road**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**Suite 201**

**Suite 201**

City & State  
**Clearwater, FL**

City & State  
**Clearwater, FL**

Zip  
**33763**

Country

Zip  
**33763**

Country

4. FEI Number  
**59-3539989**

Applied For  
 Not Applicable

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

**CARTAGENA, RICHARD A**  
**2643 SADDLEWOOD LANE**  
**PALM HARBOR FL 34685**

Name

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

**2495 Enterprise Road**

**Suite 201**

City

**Clearwater**

FL

Zip Code

**33763**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
**P**  
 NAME  
**CARTAGENA, RICHARD A**  
 STREET ADDRESS  
**2643 SADDLEWOOD LANE**  
 CITY-ST-ZIP  
**PALM HARBOR FL 34685**

☐ Delete

TITLE  
**PT**  
 NAME  
**Cartagena, Richard A**  
 STREET ADDRESS  
**2495 Enterprise Road, Suite 201**  
 CITY-ST-ZIP  
**Clearwater, FL 33763**

☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

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☐ Change ☐ Addition

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☐ Change ☐ Addition

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 REQUIRE**  
**Richard A. Cartagena**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**7-12-01**

**727-725-0400**

CR2E034 (5/01)