

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90197 003 ***150.00

626048

DOCUMENT # P99000001644

1. Entity Name

Ronvil II, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business

8087 Monetary Drive

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Unit F-1

City & State

City & State

Riviera Beach, FL

Zip

Country

Zip

Country

33404

USA

4. FEI Number

65-0896877

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

7. Name and Address of New Registered Agent

Name

M. Chris Edwards

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

1001 N. US Highway One, Ste. 400

City

Jupiter

FL

Zip Code
33477

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.

M. CHRIS EDWARDS

(NOTE: Registered Agent signature required when reinstating)

2/13/01

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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME PD
STREET ADDRESS Ronald J. Costello
CITY-ST-ZIP 8087 Monetary Dr. Unit F-1
Riviera Beach, FL 33404

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME ST
STREET ADDRESS Vilma Costello
CITY-ST-ZIP 8087 Monetary Dr., Unit F-1
Riviera Beach, FL 33404

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONALD J. COSTELLO 2/13/01 848-5790

Date

Daytime Phone #

CR2E034 (11/00)