

FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

FILED  
May 13, 2002 8:00 am  
Secretary of State

05-13-2002 90147 043 \*\*\*150.00

DOCUMENT # P99000002052

1. Entity Name

CORTEZ MGMT., INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1008 CORTEZ RD W

3. Mailing Address

25 SECOND STREET NORTH

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE. 220

DO NOT WRITE IN THIS SPACE

City & State  
BRADENTON, FL

City & State  
ST. PETERSBURG, FL

4. FEI Number

59-3552135

Applied For

Not Applicable

Zip  
34207

Country

Zip  
33701

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name  
GIBBS, B. GRAY

Street Address (P.O. Box Number is Not Acceptable)  
100 2ND. AVE., SOUTH, STE. 704

City  
ST. PETERSBURG

FL

Zip Code  
33701

DO NOT WRITE  
IN THIS SPACE

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) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

PD  
TYLER, DEAN  
310 COFFEE POT RIVIERA NE  
ST. PETERSBURG, FL 33704

TITLE  
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CITY - ST - ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Dean Tyler*

DEAN TYLER

4/22/02

727-571-1040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #