

2002 UNIFORM BUSINESS REPORT (UBR)

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

05-13-2002 90065 010 ***150.00

DOCUMENT # P99000008798

1. Entity Name
KARIGOLD, INC.

Principal Place of Business
4600 WATERFORD CT NE
ST PETERSBURG FL 33703

Mailing Address
4600 WATERFORD CT NE
ST PETERSBURG FL 33703

2. Principal Place of Business
877 Executive Center Drive

3. Mailing Address
877 Executive Center Drive

Suite, Apt. #, etc.
Suite 112

Suite, Apt. #, etc.
Suite 112

City & State
St. Petersburg, FL 33702

City & State
St. Petersburg, FL 33702

Zip Country
33702 USA

Zip Country
33702 USA

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3557359**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

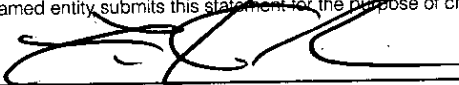
6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUSSO, FRANK
4600 WATERFORD CT NE
ST PETERSBURG FL 33703

Name
Frank Russo
 Street Address (P.O. Box Number is Not Acceptable)
877 Executive Center Drive, Suite 112
 City State Zip Code
St. Petersburg FL 33702

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)

4/24/02
 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, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RUSSO, FRANK K 4600 WATERFORD CT. N.E. SAINT PETERSBURG FL 33703	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/02
 Date
578-0303
 Daytime Phone #

CR2E034 (9/01)