

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000020687**

1. Entity Name

WYD, Corp.

FILED

Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90118 018 ***150.00

Principal Place of Business

Mailing Address

~~2843 SAGALWOOD CT.~~

~~2843 SAGALWOOD CT.~~

~~DELRAY BEACH FL 33445~~

~~DELRAY BEACH FL 33445~~

C0053083

2. Principal Place of Business

3. Mailing Address

100 E. LINTON BLVD.

100 E. LINTON BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE 303A

STE 303A

City & State

City & State

DELRAY BEACH FL

DELRAY BEACH FL

4. FEI Number

65-0926135

Applied For

Not Applicable

Zip

Country

33483

USA

Zip

Country

33483

USA

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

RUSSO, BRIAN

Name

~~2843 SAGALWOOD CT.~~

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

~~DELRAY BEACH, FL 33445~~

100 E. LINTON BLVD.

STE 303A

City

DELRAY BEACH

FL

Zip Code

33483

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

BRIAN RUSSO

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-20-01

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 | P | <input type="checkbox"/> Delete |
| NAME | RUSSO, BRIAN | |
| STREET ADDRESS | 2843 SAGALWOOD CT. | |
| CITY-ST-ZIP | DELRAY BEACH FL 33445 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | GARY CORVINO | |
| STREET ADDRESS | 100 E LINTON BLVD, Ste 303A | |
| CITY-ST-ZIP | DELRAY BEACH, FL 33483 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | CATHERINE CORVINO | |
| STREET ADDRESS | 100 E. LINTON BLVD, Ste 303A | |
| CITY-ST-ZIP | DELRAY BEACH, FL 33483 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | | |
|----------------|-------------------------------------|--|
| TITLE | | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | 100 E. LINTON BLVD. STE 303A | |
| CITY-ST-ZIP | DELRAY BEACH, FL 33483 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| 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:

BRIAN RUSSO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/01

Date

561-274-8055

Daytime Phone #

CR2E034 (11/00)