2001 UNIFORM BUSINESS REPORT (UBR)

2/:

FILED
Mar 02, 2001 8:00 am
Secretary of State
02-03-2001 90060 046 ***150.00

DOCUMENT # P99000029140

1. Entity Name
UNIVERSAL DANCE ACADEMY, INC.

✓

Principal Place of Business	Mailing Address
939 SILVER SPRINGS TERR PORT CHARLOTTE FL 33948	939 SILVER SPRINGS TERR PORT CHARLOTTE FL 33948

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
1700 TAMIAMI TR.		5799 MALTON ST.	
Suite, Apt. #, etc.: UNIT F3		Suite, Apt. #, etc.	
City & State: PORT CHARLOTTE, FL		City & State: N. PORT, FL	
Zip: 33948	Country: USA	Zip: 34286	Country: USA

4. FEI Number 65-0906948 ☐ 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
TORNABENE, ~~ANDREA~~ ~~439 SILVER SPRINGS TERRACE~~ ~~PORT CHARLOTTE FL 33948~~	Name: ANDREA TORNABENE Street Address (P.O. Box Number is Not Acceptable): 5799 MALTON ST. City: N. PORT FL Zip Code 34286

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] 1/30/01
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 $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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TORNABENE, ANDREA ~~939 SILVER SPRINGS TERR~~ ~~PORT CHARLOTTE FL 33948~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5799 MALTON ST. N. PORT, FL 34286
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD DONZA, ANTHONY ~~939 SILVER SPRINGS TERR~~ ~~PORT CHARLOTTE FL 33948~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5799 MALTON ST. N. PORT, FL 34286
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CR2E034 (10/00)

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] 2/20/01 941-429-8583
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #