

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90225 001 ***158.75

DOCUMENT # P99000029673

1. Entity Name

ALEX BAGLIONI, P A

DO NOT WRITE IN THIS SPACE

11034700

2. Principal Place of Business
5651 BAYVIEW DRIVE
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
FT LAUDERDALE, FL

City & State

4. FEI Number
65-0925607

Applied For
Not Applicable

Zip
33308

Country

Zip

Country

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

DO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
ALEX BAGLIONI
Street Address (P.O. Box Number is Not Acceptable)
5651 BAYVIEW DRIVE

City
FT LAUDERDALE FL Zip Code
33308

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

ALEX BAGLIONI

4/29/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ALEX BAGLIONI
5651 BAYVIEW DRIVE
FT LAUDERDALE, FL 33308

TITLE
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE

ALEX BAGLIONI

4/29/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #