

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000036310

1. Entity Name

L. BARBANERA & CO., INC.

FILED

May 08, 2000 8:00 am
Secretary of State

05-08-2000 90187 008 ***150.00

Principal Place of Business

Mailing Address

17235 132ND TR. N.
JUPITER FL 33478

17235 132ND TR. N.
JUPITER FL 33478-5272

2. Principal Place of Business

17235 BRIAN WAY

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

JUPITER FL

City & State

JUPITER FL

4. FEI Number

?

Applied For

Not Applicable

Zip

33478

Country

FL

Zip

Country

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

BARBANERA, LENNETTE
17235 132ND TR. N.
JUPITER FL 33478

Name

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

City

FL

Zip Code

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

Lennette Barbenera

4-25-00

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

(NOTE: Registered Agent signature required when reinstalling)

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, 2000 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. *same* OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *President* ☐ Delete
NAME *Dominick Barbenera*
STREET ADDRESS *17235 Brian Way Jupiter FL 33478*
CITY-ST-ZIP

TITLE *V/B* ☐ Change ☒ Addition
NAME *Dominick Barbenera*
STREET ADDRESS *17235 Brian Way Jupiter FL* 33478
CITY-ST-ZIP

TITLE *Vice President* ☐ Delete
NAME *Dominick Barbenera*
STREET ADDRESS *17235 Brian Way Jupiter FL* 33478
CITY-ST-ZIP

TITLE *P/T* ☐ Change ☐ Addition
NAME *Lennette Barbenera*
STREET ADDRESS *17235 Brian Way Jupiter FL* 33478
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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:

Lennette Barbenera

Date

Daytime Phone #

4-25-00 561 744 8005

CR2E034 (9/99)