

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91591 041 ***150.00

DOCUMENT # P99000041251

1. Entity Name
E AND O GROUP CORPORATION

Principal Place of Business
c/o Roth Russo
9350 S. Dixie Hwy PH-2
MIAMI, FLA 33156

Mailing Address
c/o Roth Russo
9350 S. Dixie Hwy. PH-2
MIAMI, FLA. 33156

2. Principal Place of Business
1914 S. UNIVERSITY DR.
 Suite, Apt. #, etc.

3. Mailing Address
DR. 4400 Hill Crest Drive
 Suite, Apt. #, etc.
APT # 105

City & State
DAVIE, FLORIDA
 Zip
33324
 Country
BROWARD

City & State
HOLLYWOOD, FLA
 Zip
33021
 Country
DADE

4. FEI Number
65-0917978

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

552059

6. Name and Address of Current Registered Agent

LEONARDO A. ROTH
9350 South Dixie Hwy PH-2
MIAMI, FLA. 33156

7. Name and Address of New Registered Agent

Name
DANIEL OGNIAN
 Street Address (P.O. Box Number is Not Acceptable)
4400 Hill Crest Drive Apt #105
 City
HOLLYWOOD, FL Zip Code
33021

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  **DANIEL OGNIAN - President** **4-25-01**
 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! FEES \$150.00
After MAY 1, 2001 Fee will be \$550.00
Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE DPT	☐ Delete
NAME DANIEL OGNIAN	
STREET ADDRESS 4400 Hill Crest Drive #105	
CITY-ST-ZIP HOLLYWOOD, FLA. 33021	
TITLE DUS	☐ Delete
NAME ETEL AMMAZZAGATTE DE OGNIAN	
STREET ADDRESS 4400 Hill Crest Drive #105	
CITY-ST-ZIP HOLLYWOOD, FLA. 33021	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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:  **DANIEL OGNIAN - President** **4-25-01** **954-474-3388**
 Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)