

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Amended

DOCUMENT # P99000049095

1. Entity Name
FRONTIER CAPITAL, INC.



FILED

03 JUN -3 AM 10: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☒ CHECK HERE IF MAKING CHANGES

Principal Place of Business
5102 S WESTSHORE BLVD
TAMPA, FL 33611

Mailing Address
5102 S WESTSHORE BLVD
TAMPA, FL 33611

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3583847

Applied For

Not Applicable

Zip

Country

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

QUIROZ, MARIO
8021 LUCUYA WAY
TEMPLE TERRACE, FL 33637

Name MARIO QUIROZ

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

5102 S WESTSHORE BLVD Suite 100

City Tampa

FL

Zip Code 33584

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

Mario Quiroz

(NOTE: Registered Agent signature required when resigning)

05/08/03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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

TITLE	PM	☒ Delete
NAME	QUIROZ, MARIO	
STREET ADDRESS	8021 LUCUYA WAY	
CITY-ST-ZIP	TAMPA, FL 33637	
TITLE	D	☒ Delete
NAME	MELARA, CARLOS	
STREET ADDRESS	8634 TESSARA LANE	
CITY-ST-ZIP	TAMPA, FL 33647	
TITLE	S	☒ Delete
NAME	OLIVERI, JOSE A	
STREET ADDRESS	8634 SEA HARBOUR LANE	
CITY-ST-ZIP	TAMPA, FL 33637	
TITLE	PM	☐ Delete
NAME	QUIROZ, MARIO	
STREET ADDRESS	5102 S WESTSHORE BLVD - Suite 100	
CITY-ST-ZIP	TAMPA FL 33584	
TITLE	D	☐ Delete
NAME	QUIROZ, MARIO	
STREET ADDRESS	5102 S Westshore Blvd, Suite 100	
CITY-ST-ZIP	TAMPA FL 33584	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. 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
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CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mario Quiroz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/28/03

Date

Daytime Phone #