

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90112 005 ***150.00

0088620 AV

DOCUMENT # P99000055172

1. Entity Name

RUGGIERO SOUTH, INC.

Principal Place of Business

**1640 LEE ROAD
WINTER PARK FL 32789**

Mailing Address

**1640 LEE ROAD
WINTER PARK FL 32789**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4447 EDGEWATER DR.

Suite, Apt. #, etc.

SUITE B

City & State

ORLANDO FLORIDA

Zip

32804

Country

USA

3. Mailing Address

4447 EDGEWATER DR.

Suite, Apt. #, etc.

SUITE B

City & State

ORLANDO FLORIDA

Zip

32804

Country

USA

4. FEI Number

59-3584491

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

RUGGIERO, CARL J

**1640 LEE ROAD
WINTER PARK FL 32789**

7. Name and Address of New Registered Agent

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

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, 2002 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

TITLE	VP	☐ Delete
NAME	RUGGIERO, CARL	
STREET ADDRESS	1640 LEE ROAD	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	T	☐ Delete
NAME	RUGGIERO, ALFRED	
STREET ADDRESS	1640 LEE ROAD	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE	PD	☐ Delete
NAME	RUGGIERO, MARGARET	
STREET ADDRESS	7014 13TH AVE # 210	
CITY-ST-ZIP	BROOKLYN NY 11228	
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	824 BRYN MAWR ST.	
CITY-ST-ZIP	ORLANDO, FL 32804	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	800 BRYN MAWR ST.	
CITY-ST-ZIP	ORLANDO, FL 32804	
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:

RUGGIERO, CARL J.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/7/02 (407) 521-6701

CR2E034 (9/01)