## **2000 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## DOCUMENT # P99000095887 Jul 26, 2000 8:00 am 1. Entity Name **Secrétary of State** CNA CONSULTING, INC. 07-26-2000 90007 047 \*\*\*150.00 Principal Place of Business Mailing Address 3400 FROSTY WAY. #4 3400 FROSTY WAY. #4 NAPLES FL 34112 NAPLES FL 34112 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Numbe Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RANKIN, DOUGLAS L ESQ. Street Address (P.O. Box Number is Not Acceptable) 2335 TAMIAMI TR. N., #308 NAPLES FL 34103 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, typed or printed name of registered agent and title if applical a FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Addition TITLE Delete TITLE FERRARI, CLAUDIO NAME STREET ADDRESS STREET ADDRESS 3400 FROSTY WAY, #4 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34112 Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP · Delete ~ ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 repeiver or tustee 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.

100 time Prone # 1-7754608

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DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILINGS P.O.BOX 1500 TALLAHASSEE, FL 32302-1500

JULY 21, 2000

Dear Sirs,

Re: CNA CONSULTING, INC. – FEI # 59-3607659

I refer to your SECOND NOTICE to pay \$ 550.00 for delayed forwarding of 2000 UNIFORM BUSINESS REPORT.

In this connection, I would like to inform you that I did not receive prior notification that CNA Consulting, Inc. was expected to submit the report.

In addition, CNA Consulting was created in October 1999, and I was not aware of the existance of the above obligation.

I would appreciate your kindly granting CNA Consulting, Inc. a waiver from the \$400.00 penalty and accept my enclosed payment of \$150.00.

Thank you.

Sincerely yours.

Claudio Febrari

President

CNA CONSULTING INC

3400 Frosty Way, 4

NAPLES, Fl 34112

Tel. (941) 775-4608

Encl. - 2000 UNIFORM BUSINESS REPORT

- CHECK # 1024 for \$ 150.00