

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000098479**

1. Entity Name

ZIDE OF FLA., INC.

FILED**Feb 19, 2000 8:00 am**
Secretary of State

02-19-2000 90009 025 ***150.00

Principal Place of Business

Mailing Address

11950 SEMINOLE BOULEVARD
LARGO FL 3377811950 SEMINOLE BOULEVARD
LARGO FL 33778-2803

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

NIAGARA TAP

NIAGARA TAP

Suite, Apt. #, etc.

Suite, Apt. #, etc.

11950 SEMINOLE BLVD.

11950 SEMINOLE BLVD.

City & State

City & State

LARGO, FL

LARGO, FL

4. FEI Number

69-3608222

Applied For

Not Applicable

Zip

Country

Zip

Country

33778

FLORIDA

33778

FLORIDA

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

DEFILIPPI, ERNEST J
11950 SEMINOLE BOULEVARD
LARGO FL 33778

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ DeleteNAME PRESIDENT
STREET ADDRESS LAWRENCE ZINCHIN
CITY-ST-ZIP 8667 SEMINOLE LOT 44
SEMINOLE, FL 33772TITLE ☐ DeleteNAME VP, SECY, TREAS.
STREET ADDRESS ERNEST J. DEFILIPPI
CITY-ST-ZIP 4500 HURON RD.
ST. PETERSBURG, FL 33708TITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DeleteNAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
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:

ERNEST J. DEFILIPPI, VP

1/10/00

727-581-5331

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #