2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000098705**



Sep 18, 2000 8:00 am Secretary of State 1. Entity Name JOSEPH R. FAZIO III. P.A. 09-18-2000 90019 014 ***150.00 Mailing Address Principal Place of Business 633 S. ANDREWS AVE. 633 S. ANDREWS AVE. SUITE 500 SUITE 500 FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-096284 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FAZIO, JOSEPH R III Street Address (P.O. Box Number is Not Acceptable) 633 S. ANDREWS AVE. SUITE 500 FT. LAUDERDALE FL 33301 Zip Code FI 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min, will be \$750.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PV ST Change ☐ Addition TITLE TITLE ☐ Delete JOJEPH R. FALIO ZA NAME NAME STREET ADDRESS 633 S. GNONOW GVENE STREET ADDRESS CITY-ST-ZIP AUGGRAGICE. 333 D/ CITY-ST-ZIP Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition TITI F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS 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:

CiTY-SY-ZIP

FILED

Joseph R. Fazio, III, P.A. 633 S. Andrews Avenue Suite 500 Fort Lauderdale, Florida 33301

September 12, 2000

Division of Corporations Annual Report Filings P. O. Box 1500 Tallahassee, Florida 32302-1500

To Whom It May Concern,

Enclosed is our 2000 Annual Report along with a check in the amount of \$150.00. Please note that we never received any previous notice and therefore was not aware of the filing deadline. We incorporated at the end of December, 1999 and have never previously filed any annual report and will not be late in filing in the future.

Therefore, please abate the penalty and accept this report and payment in the amount of \$150.00.

Thank you for your anticipated cooperation.

Joseph Q. Forcis Ett.

Very truly yours,

Joseph R. Fazio, III

President

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