

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000098889

1. Entity Name

RON'S DREAM, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90062 015 ***150.00

Principal Place of Business

Mailing Address

602 SOUTH BOULEVARD
TAMPA FL 33606

602 SOUTH BOULEVARD
TAMPA FL 33606-2630

2. Principal Place of Business

3. Mailing Address

1501 LAKE AVE SE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

LARGO FL

4. FEI Number

59-3607441

Applied For

Not Applicable

Zip

Country

Zip

Country

33771

PINELLAS

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

R. JEFFREY STULL, P.A.
602 SOUTH BOULEVARD
TAMPA FL 33606

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 State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS DAMICO, RON
CITY-ST-ZIP 602 SOUTH BOULEVARD
TAMPA FL 33606

TITLE ☒ Change ☐ Addition
NAME P/D
STREET ADDRESS 1501 LAKE AVE SE
CITY-ST-ZIP LARGO FL 33771

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME V
STREET ADDRESS DAMICO, RICHARD
CITY-ST-ZIP 1501 LAKE AVE SE
LARGO FL 33771

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME V
STREET ADDRESS RICH, PHIL
CITY-ST-ZIP 1501 LAKE AVE SE
LARGO FL 33771

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME V
STREET ADDRESS GOLDSTEIN, MICHAEL
CITY-ST-ZIP 1501 LAKE AVE SE
LARGO FL 33771

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME V
STREET ADDRESS BOWEN, JEFFERY
CITY-ST-ZIP 1501 LAKE AVE SE
LARGO FL 33771

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME S
STREET ADDRESS ARSENAULT, SHELIA
CITY-ST-ZIP 1501 LAKE AVE SE
LARGO FL 33771

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-17-2000 727-584-2499

CR20034 (1/98)