

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000102993

1. Entity Name

ECONOMY WAREHOUSE AND DELIVERY SERVICE OF FLORID

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90058 009 ***150.00

Principal Place of Business

Mailing Address

3020 REYNOLDS RD.
LAKELAND FL 33801

3020 REYNOLDS RD.
LAKELAND FL 33801

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3614251

Applied For

Not Applicable

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

ALLEGRA, RICHARD L
3020 REYNOLDS RD.
LAKELAND FL 33801

Name

LARRY RICHMAN

Street Address (P.O. Box Number is Not Acceptable)

2678 TEAKWOOD DRIVE

City

CLEARWATER

FL

Zip Code

33764

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

LARRY RICHMAN, MANAGER

(NOTE: Registered Agent signature required when reinstating)

2-28-00

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
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PRESIDENT
RICHARD ALLEGRA
5507 ROY COURT
NEW MARKET MD. 20794

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition

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:

RICHARD L ALLEGRA

Date

Daytime Phone #

CR2F034 (9/99)