

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90145 030 ***158.75

DOCUMENT # P99000105981

1. Entity Name

RONNIE'S CRITTER SITTING SERVICE, INC.

Principal Place of Business

Mailing Address

141 CAMERON DR.
 WESTON FL 33326

141 CAMERON DR.
 WESTON FL 33326

940111

2. Principal Place of Business

1233 Chenille Circle

3. Mailing Address

1233 Chenille Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Weston Florida

City & State

Weston, Florida

4. FEI Number

65-0964944

Applied For

☒ Not Applicable

Zip

33327

Country

USA

Zip

33327

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DIORENZO, RONNIE D
141 CAMERON DR.
WESTON FL 33326

7. Name and Address of New Registered Agent

Name

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

1233 Chenille Circle

City **Weston**

FL

Zip Code

33327

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

TITLE ☐ Delete
 NAME **PSVT**
 STREET ADDRESS **DIORENZO, RONNIE D**
 CITY-ST-ZIP **141 CAMERON DR. WESTON FL 33326**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **DIORENZO, RONNIE D**
 CITY-ST-ZIP **141 CAMERON DR. WESTON FL 33326**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS **1233 Chenille Circle**
 CITY-ST-ZIP **Weston FL 33327**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS **1233 Chenille Circle**
 CITY-ST-ZIP **Weston FL 33327**

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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

CR2E034 (9/99)

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:

Ronnie Di Lorenzo
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/00
 Date

954-389-8744
 Daytime Phone #