

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 05, 2001 8:00 am**  
**Secretary of State**

06-14-2001 90012 030 \*\*\*150.00  
 07-05-2001 90010 049 \*\*\*400.00

**DOCUMENT # P99000106951**

1. Entity Name

**VEINO EXCAVATING, INC.**

**C0072352**



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**155 RAILROAD AVENUE**  
**OSTEEN FL 32764**

Mailing Address  
**P.O. BOX 503**  
**OSTEEN FL 32764**

2. Principal Place of Business

**155 Railroad Ave**  
 Suite, Apt. #, etc.  
**OSTEEN**  
 City & State

3. Mailing Address

**PO BOX 503**  
 Suite, Apt. #, etc.  
**OSTEEN FL**  
 City & State

4. FEI Number **65-0976511**

Applied For  
 Not Applicable

Zip

**FL**

Country

**USA**

Zip

**32764**

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**VEINO, AUDREY J**  
**155 RAILROAD AVENUE**  
**OSTEEN FL 32764**

7. Name and Address of New Registered Agent

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, 2001 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	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>VEINO, BRADLEY</b>	
STREET ADDRESS	<b>155 RAILROAD AVENUE</b>	
CITY-ST-ZIP	<b>OSTEEN FL 32764</b>	
TITLE	<b>ST</b>	<input type="checkbox"/> Delete
NAME	<b>VIENO, AUDREY J</b>	
STREET ADDRESS	<b>155 RAILROAD AVENUE</b>	
CITY-ST-ZIP	<b>OSTEEN FL 32764</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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: *Audrey J Veino* **AUDREY J VEINO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**6/6/01 407-323-5875**

Date Daytime Phone

Attachment

 C0072352  
P 99000101951

Div of Corp.

I apologize that this form was overlooked. I was in the state of N.H. Dec. thru March helping to take care of my terminally ill Mother. I saw that other people were picking up and forwarding our mail and this was missed and not found till June 5. The young lady thought it unimportant. I had to return to N.H. again in May as to attend a Memorial and Meeting of her trust and am very sorry that this was overlooked. Please accept my regrets re: this matter.

Sincerely

Andrew J. Verrin

407-323-5875

Attachment  
Doc# P99000106951  
C0078358



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

June 14, 2001

VEINO EXCAVATING, INC.  
P.O. BOX 503  
OSTEEN, FL 32764

Subject: VEINO EXCAVATING, INC.

Reference P99000106951  
Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/RR  
ANNUAL REPORTS SECTION