

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #P99000107569

1. Entity Name

RELIANCE HOTEL RENOVATIONS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

11373 Little Bear Way

Suite, Apt. #, etc.

3. Mailing Address

11373 Little Bear Way

Suite, Apt. #, etc.

City & State

Boca Raton, Florida

City & State

Boca Raton, Florida

Zip

33428

Country

Zip

33428

Country

2002 UBR

4. FEI Number

65-0966842

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

SPIEGEL & UTRERA, P.A.

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

1840 Southwest 22 Street

4th Floor

City

Miami

FL

Zip Code

33145

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.

SPIEGEL & UTRERA, P.A.

SIGNATURE BY:

Natalia Utrera, Vice President

(NOTE: Registered Agent signature required when re-registering)

DATE

12/23/02

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	PSTD Capozzi, James 11373 Little Bear Way Boca Raton, Florida 33428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Capozzi, Deborah 11373 Little Bear Way Boca Raton, Florida 33428
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

James Capozzi

James Capozzi, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

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AFFIDAVIT IN SUPPORT OF
REQUEST TO WAIVE THE
FLORIDA DEPARTMENT OF STATE
CORPORATE ANNUAL REPORT LATE FEES

STATE OF FLORIDA)
)
COUNTY OF PALM BEACH)

1. James Capozzi is the President of RELIANCE HOTEL RENOVATIONS, INC., a Florida corporation, (hereinafter "Corporation").
2. That the Corporation was administratively dissolved by the Florida Department of State on October 4, 2002.
3. That the Corporation failed to file its 2002 Annual Report or pay the 2002 Annual Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:
 - 3.1 the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Corporation; and,
 - 3.2 the written notice was never received by the Corporation or its Registered Agent that the Florida Department of State was commencing a procedure to administratively dissolve the Corporation.
4. The Corporation requests the Florida Department of State reinstate the Corporation upon the payment by the Corporation of its 2002 Annual Report fees and the filing of its 2002 and 2003 Annual Reports, which are presented simultaneously with this Affidavit.
5. RELIANCE HOTEL RENOVATIONS, INC. satisfies the requirements of the Florida Statutes 607.0401.
6. No further ground or grounds exist for the administrative dissolution of the Corporation.

Dated: 20 day of December, 2002

FURTHER, AFFIANT SAYETH NOT

RELIANCE HOTEL RENOVATIONS, INC.

By: James Capozzi, President
James Capozzi, President

SWORN AND SUBSCRIBED

before me this 20 day of December, 2002.

Padmine Narain
Notary Public, State of Florida at Large

Printed Name: _____

Commission Expires: _____

