

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90105 029 ***150.00

DOCUMENT # S36350

1. Entity Name
ARTHUR BILOTTI & ASSOCIATES, INC.

Principal Place of Business

**4532 HARRISON ST.
HOLLYWOOD FL 33021**

Mailing Address

**4532 HARRISON ST.
HOLLYWOOD FL 33021**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE



4. FEI Number 59-3049914

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

**BILOTTI, ARTHUR
4532 HARRISON ST.
HOLLYWOOD FL 33021**

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, 2002 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
D
NAME
BILOTTI, ARTHUR
STREET ADDRESS
4532 HARRISON ST.
CITY-ST-ZIP
HOLLYWOOD FL

☐ **Delete**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ **Change** ☐ **Addition**

TITLE
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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:

Arthur Bilotti
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/02 954 966-1375

0148286 AV

CR2E034 (9/01)