

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2002 8:00 am
Secretary of State

07-31-2002 90102 030 ***150.00

DOCUMENT # S40337

1. Entity Name

SMS OF SARASOTA, INC.

Principal Place of Business

**5740 MIDNIGHT PASS RD
UNIT 7304
SARASOTA FL 34242**

Mailing Address

**5740 MIDNIGHT PASS RD
UNIT 7304
SARASOTA FL 34242**

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

NOT APPLICABLE

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

**MCCARTHY, DAN J
5740 MIDNIGHT PASS RD
SARASOTA FL 34242**

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. I am familiar with, and accept the obligations of registered agent.

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 \$350.00/150
After September 13, 2002 Fee will be \$750.00
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 **P SHMALO, RAY** ☐ Delete
STREET ADDRESS **7825 ESTANCIA WAY**
CITY-ST-ZIP **SARASOTA FL**

TITLE
NAME **7132** ☒ Change ☐ Addition
STREET ADDRESS **7132 Rue de Palisades**
CITY-ST-ZIP **SARASOTA FL 34238**

TITLE
NAME **ST MCCARTHY, DANIEL J** ☐ Delete
STREET ADDRESS **5740 MIDNIGHT PASS RD., F-304**
CITY-ST-ZIP **SARASOTA FL 34242**

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

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME ☐ Delete
STREET ADDRESS
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NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
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:

SIGNATURE OF DANIEL J. MCCARTHY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-26-02

941-349-4784

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

SMS Of Sarasota Inc.
5740 Midnight Pass Road F-304
Sarasota Fl, 34242
941-349-4784

#S 40337

July 27, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302

Subject: Payment of filing fee and Waived late fee

Attached is the 2002 Uniform Business Report, Document # S40337 for SMS of Sarasota, Inc.

I have included a check for \$150.00 the original filing fee. This was the first notice we have receive.
There was no prier notice received by my office.

This letter is in compliance with your instructions of question # 8 , under frequently asked questions.

Thank you,



Daniel J. McCarthy
Secretary Treasure
SMS of Sarasota, Inc

CC Ray Shmalo, President