2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2001 8:00 am
Secretary of State
03-22-2001 90042 014 ***150.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # V12248

1. Entity Name
AL-DAN INCORPORATED

Principal Place of Business	Mailing Address
504 JENNIFER LANE WINDERMERE FL 34786 US	P. O. BOX 1698 WINDERMERE FL 34786 US

2. Principal Place of Business	3. Mailing Address
5142 Pine Top Place	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Orlando, FL	City & State
Zip: 32819 / Country: USA	Zip / Country

4. FEI Number 59-3107578 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CAVALLO, DANIEL
504 JENNIFER LANE
WINDERMERE FL 34786

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable) 5142 Pine Top Place
City Orlando FL Zip Code 32819

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 Alice P. Cavallo Alice P. Cavallo 3/20/01
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CAVALLO, DANIEL 504 JENNIFER LANE WINDERMERE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 326 PALM ST WINDERMERE, FL 34786 ~~5142 Pine Top Place~~ Orlando, ~~FL 32819~~
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPST CAVALLO, ALICE 504 JENNIFER LANE WINDERMERE FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 326 PALM ST WINDERMERE FL 34786 ~~5142 Pine Top Place~~ ~~Orlando, FL 32819~~
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Alice P. Cavallo Alice P. Cavallo 3/20/01 407-876-3033
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)