

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V54453

1. Entity Name

COSTA, INC.

Principal Place of Business

701 Washington Avenue
Miami Beach, FL 33139

Mailing Address

701 Washington Avenue
Miami Beach, FL 33139

2. Principal Place of Business

c/o Trent Merrill

3. Mailing Address

c/o Trent Merrill

Suite, Apt. #, etc.

4599 District Boulevard

Suite, Apt. #, etc.

4599 District Boulevard

City & State

Vernon, California

City & State

Vernon, California

4. FEI Number

65-0357442

Applied For

Not Applicable

Zip

90058

Country

USA

Zip

90058

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Maccharella, Giancarlo
701 Washington Avenue
Miami Beach, FL 33139

7. Name and Address of New Registered Agent

Name

Robert E. Gallagher

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

2200 Museum Tower

150 West Flagler Street

City
Miami

FL

Zip Code
33130

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

April 17, 2000

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, 2000 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 VTD ☐ Delete
NAME Montesano, Gene
STREET ADDRESS 701 Washington Avenue
CITY-ST-ZIP Miami Beach, FL 33139

TITLE S ☒ Delete
NAME Arlene Montesano
STREET ADDRESS 701 Washington Avenue
CITY-ST-ZIP Miami Beach, Florida 33139

TITLE PD ☒ Delete
NAME Macchiarella, Giancarlo
STREET ADDRESS 701 Washington Avenue
CITY-ST-ZIP Miami Beach, FL 33139

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME Montesano, Gene
STREET ADDRESS 4599 District Boulevard
CITY-ST-ZIP Vernon, CA 90058

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 100003386091--6
CITY-ST-ZIP -09/08/00--01003--017
*****550.00 *****550.00

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

TITLE VST ☐ Change ☒ Addition
NAME Trent Merrill
STREET ADDRESS 4599 District Boulevard
CITY-ST-ZIP Vernon, CA 90058

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

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)