

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000014793

**Entity Name:** ULELE TIA, INC.

**Current Principal Place of Business:**

2025 E SEVENTH AVE  
TAMPA, FL 33605

**Current Mailing Address:**

2025 E SEVENTH AVE  
TAMPA, FL 33605 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHANNON, JEFFREY C  
2025 E SEVENTH AVE  
TAMPA, FL 33605 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P, D  
Name GONZMART, RICHARD  
Address 2025 E. SEVENTH AVE  
City-State-Zip: TAMPA FL 33605

Title S,D  
Name GONZMART, CASEY  
Address 2025 E. SEVENTH AVE  
City-State-Zip: TAMPA FL 33605

Title ASST. SECRETARY  
Name SHANNON, JEFFREY  
Address 2025 E SEVENTH AVE  
City-State-Zip: TAMPA FL 33605

Title ASST. TREASURER  
Name FEDOROVICH, DENNIS  
Address 2025 E SEVENTH AVE  
City-State-Zip: TAMPA FL 33605

Title ASST. TREASURER  
Name FARNELL, KRISTIE  
Address 2025 E SEVENTH AVE  
City-State-Zip: TAMPA FL 33605

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JEFFREY C SHANNON

AS

03/22/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date