

**FILED**  
**Oct 01, 2002 8:00 am**  
**Secretary of State**

05-19-2002 90224 035 \*\*\*150.00

**2002 UNIFORM BUSINESS REPORT (UBR)**

**DOCUMENT # P01000066880**  
1. Entity Name  
**FRESH & EASY, INC.**

Principal Place of Business  
1749 E. HALLANDALE BCH BLVD., #196  
HALLANDALE FL 33009-4618

Mailing Address  
1749 E. HALLANDALE BCH BLVD., #196  
HALLANDALE FL 33009-4618

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number  Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**MUNOZ, GLADYS**  
1749 E. HALLANDALE BCH BLVD., #196  
HALLANDALE FL 33009-4618

7. Name and Address of New Registered Agent  
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 \_\_\_\_\_ (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.

**FILE NOW!!! FEE IS \$550.00**  
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 STREET ADDRESS CITY-ST-ZIP	PD MUNOZ, GLADYS 1749 E. HALLANDALE BCH BLVD., #196 HALLANDALE FL 33009-4618 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VALDES, GUILLERMO 1749 E. HALLANDALE BCH BLVD., #196 HALLANDALE FL 33009-4618 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rafael Muñoz - Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARROMERO, MELISSA 1749 E. HALLANDALE BCH BLVD., #196 HALLANDALE FL 33009-4618 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CRE034 (4/02)

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]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 9/23/02  
Daytime Phone #: 954-961-6418

ATTACHMENT (TITLES)

- TITLES
1. MUNOZ Gladys - PRESIDENT
  2. MUNOZ RAFAEL - VICE-PRESIDENT
  3. CARROMERO, MELISSA - TREASURER

attachment

43403



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

August 27, 2002

FRESH & EASY, INC.  
1749 E. HALLANDALE BCH BLVD., #196  
HALLANDALE, FL 33009-4618

Subject: FRESH & EASY, INC.

Reference Number: P01000066880

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/jn  
ANNUAL REPORTS SECTION

ATTACHMENT TITLE(S)

1. MUÑOZ Gladys - PRESIDENT.
2. MUÑOZ RAFAEL - VICE-PRESIDENT.
3. CARRAÑO MELISA - TREASURER.

Attachment

43403

PO 1000060880

August 16, 2002

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

To whom it may concern:

At the beginning of last May of the year 2002, I filled out the 2002 Uniform Business Report, made a deletion and an addition and, wrote a check for the amount of \$150.00 which was required of me at that time. I sent everything on time according to instructions.

I was later sent another 2002 Uniform Business Report application and was told I needed to send in the amount of \$750.00! Alarmed, I called in and spoke to a gentleman that advised me to send in the new application, specifying the deletion and addition that was never made and to include copies of both sides of the canceled check. He also informed me that the deposit of the \$150.00 showed as having been made.

I am following his instructions and hope that this will resolve the problem once and for all. Please do not forget to make the deletion and addition.

Thank you very much for your attention to this matter.

Sincerely,

  
Gladys Muñoz

Attachment

43403

#P01000066880

PAY TO THE ORDER OF *Department of State*

*One hundred fifty dollars and*

WASHINGTON MUTUAL BANK, F.S.  
 1401 N.W. 57th AVENUE, SUITE 100  
 MIAMI, FL 33149  
 1-800-768-7088 24 HOUR CUSTOMER SERVICE

RAFAEL MUNOZ  
 GLADYS CASTRO-MUNOZ  
 1749 E. HALLANDALE BEACH BLVD., #196  
 HALLANDALE, FL 33009-4618

DATE *4-26-02*

\$ *150.00*

GOLD CUSTOMER

FOR *annual fee*

⑈000354⑈ ⑆2670844331⑆129⑈127425⑈1⑈

⑈0000015000⑈

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 0354  
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