

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 11, 2002 8:00 am
Secretary of State

07-11-2002 90242 036 ***150.00

DOCUMENT # P96000024684

1. Entity Name

CATERING BY MARIA JOSE ALMEIDA, INC.

Principal Place of Business

425 SW 64 AVE
 MIAMI FL 33144

Mailing Address

425 SW 64 AVE
 MIAMI FL 33144

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

65-0680548

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

ALMEIDA, MARIA J
425 SW 64 AVE
MIAMI FL 33144

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 \$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 ☐ Delete
 NAME **P**
 STREET ADDRESS **ALMEIDA, MARIA J**
 CITY-ST-ZIP **425 SW 64 AVE**
MIAMI FL 33144

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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

7/3/02 305-761-0427
 Date Daytime Phone #

CR2E034 (4/02)

Attachment
B0128614

July 2, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

From: Catering By Maria Jose Almeida, Inc.
425 S.W. 64th Avenue
Miami, Florida 33144

Ref: P96000024684 Late filing

Sirs:

Today, July 1, 2002 I received the 2002 Uniform Business Report for year 2002, which was delivered to 425 SW 64th Court Miami, Florida instead of my address which is **425 S.W. 64th Avenue Miami, FL 33144.**

I know that the report is late, but it was beyond my control due to the fact that it was delivered to the wrong address.

I kindly and humbly request to be excused from being assessed the late filing penalty.

I will greatly appreciate this favor. I have always timely filed the report.

Very Truly Yours


Maria J. Almeida