FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2002 8:00 am
Secretary of State
07-25-2002 90129 009 ***158.75

DOCUMENT # L01000041112

1. Entity Name
SUBARASHI-DELI GOURMET, LLC.

DO NOT WRITE IN THIS SPACE

971357

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2. Principal Place of Business	3. Mailing Address
8042 NW 66 STREET	8042 NW 66 STREET
Suite, Apt. #, etc.: 1	Suite, Apt. #, etc.
City & State: MIAMI, FL	City & State: MIAMI, FL
Zip: 33166 Country: USA/DADE	Zip: 33166 Country: USA/DADE

4. FEI Number: 65-1098235 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: ORLANDO YIDI

Street Address (P.O. Box Number is Not Acceptable): 8042 NW 66 STREET

City: MIAMI **FL** Zip Code: 33166

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: Nefnefe Cure. 07-02-02
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) ☐

January 1 - May 1 Fee is $150.00
After May 1 Fee is $550.00
Amended UBR is $61.25
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	President
NAME	ORLANDO YIDI
STREET ADDRESS	8042 NW 66 STREET
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	SECRETARY
NAME	NEFNEFE CURE
STREET ADDRESS	8042 NW 66 STREET
CITY-ST-ZIP	MIAMI, FL 33166
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Nefnefe Cure. 07-02-02 305-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
971357

JULY 2, 2002.

FLORIDA DEP. OF STATE
DIVISION OF CORPORATION.

Ref: SUBARASHI DELI GOURMET, LLC.
DOC# L01000041112.

Dear Gentlemen:

We apologize for the delay in filing our Uniform Business Report 2002, but unfortunately we were not aware of this specific requirement, also we never received the form by mail.

Please, be assured that we are not trying to evade our responsibility, Therefore we feel that the above facts constitute a justify circumstance and humbly request your consideration in removing our penalty.

We are enclosing the complete form with its specific check.

Respectfully yours,

Nefnefe Cure.
Nefnefe Cure.