

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # 455160

1. Entity Name
RUBEN TACO HOUSES, INC.



Principal Place of Business
**2100 DOG TRACK RD
PENSACOLA FL 32506**

Mailing Address
**2100 DOG TRACK RD
PENSACOLA FL 32506**

FILED

03 JUN 26 AM 11: 58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**GONZALES, RUBEN
2100 DOG TRACK RD.
PENSACOLA FL 32506**

4. FEI Number **59-1545256**
Applied For
Not Applicable

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

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GONZALES, RUBEN 2100 DOG TRACK RD PENSACOLA FL 32506	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
000021464880 07/10/03--01064--016 **150.00		
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"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Ruben Gonzales** *Ruben Gonzales* 4/6/03 850 456 9182
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

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June 18, 2003

To Whom It May Concern:

Enclosed are copies of our UBR forms and new checks to replace checks that were written for each of these corporations on April 29, 2003. The original forms and checks were mailed on April 29, 2003. (check numbers 30162/ 10828) We have always mailed these fees before the May 1st deadline; please waive the late fee. I have called the banks and neither check has cleared. If you have any questions please contact me at 850-324-1915. Thank you in advance.

Sincerely,

Diana Stull

Diana Stull