2000 UNIFORM BUSINESS REPORT (UBR)

4/7

DOCUMENT # 469482

FILED
May 24, 2000 8:00 am
Secretary of State
04-22-2000 90035 031 ***150.00

1. Entity Name

GUIDA'S ITALIAN MARKET, INC.

Principal Place of Business	Mailing Address
22084 WOODSET WAY BOCA RATON FL 33428	22084 WOODSET WAY BOCA RATON FL 33428-3830

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
78 E. McNab Rd.	78 E. McNab Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pompano Beach FL	City & State: Pompano Beach Florida
Zip: 33060 Country: Broward	Zip: 33060 Country: Broward

4. FEI Number 59-1705074 ☐ 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
MCCONIGLE, JAMES T. 7027 W BROWARD BLVD, STE 280 PLANTATION FL 33317	Name: Guida's Italian Mkt. Inc. Street Address (P.O. Box Number is Not Acceptable): 78 E. McNab Rd City: Pompano Beach FL FL Zip Code: 33060

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

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 $150.00
After MAY 1, 2000 Fee will be $550.00
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	P GUIDA, ORONZO 22084 WOODSET WAY BOCA RATON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GUIDA,KATHLEEN 22084 WOODSET WAY BOCA RATON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Guida, ORONZO 1615 SW 17th TERRACE BOYNTON Beach, FL 33426	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KATHLEEN Guida 1615 SW 17th TERRACE Boynton Beach, FL 33426	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/99)

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: Oronzo Guida 4-13-2000 954-782-6003
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #