

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT #

676322

1. Entity Name

Hot Cookies, Inc.

02 OCT 30 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7501 Dadeland Mall

3. Mailing Address

5924 SW 68th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

592007995

Applied For

Not Applicable

Zip

33156

Country

USA

Zip

~~33156~~

Country

33143

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Sheryl Berrin

Street Address (P.O. Box Number is Not Acceptable)

5924 SW 68th Street

City

South Miami

FL

Zip Code

~~33156~~

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

Sheryl Berrin

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

10/22/02

DATE

33143

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
NAME
STREET ADDRESS
CITY-ST-ZIP
Larry Berrin / President
5924 SW 68 Terr.
S. Miami, FL 33143

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
300008676319
10/29/02--01136--029 **150.00

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**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)



Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To whom it may concern:

I have enclosed our UBR report. Please note that because of an address change we did not receive the documents necessary to complete the filing in time. Furthermore, because of significant changes in management we were unaware of our failure to file until recently. Our company has shown a record of timeliness with the state, and therefore we ask that leniency be considered with regards to this filing.

If you have questions regarding this matter, please contact Bill Fuller at 305.667.5577.

Sincerely,

A handwritten signature in black ink, appearing to be "Bill Fuller", written over a horizontal line.

Bill Fuller
COO
Hot Cookies, Inc.
Document# 676322