

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000005576

1. Entity Name

MATISSES' YOGURT, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90416 046 ***150.00

Principal Place of Business

6831-F HOLLISTER AVE
GOLETA CA 93117

Mailing Address

P.O. BOX 3319
SARASOTA FL 34230-3319
US

2. Principal Place of Business

101 WILLOW LAKE DR.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
PALM DESERT, CA.

City & State

4. FEI Number 77-0079673

Applied For

Not Applicable

92260

Country US

Zip

Country

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

MATISSE, CARL
3800 S. TAMiami TRAIL
#100
SARASOTA FL 34239

Name GEORGE TAMIGLIO, JR.

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

1634 MAIN ST.

City SARASOTA

FL

Zip Code 34236

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04-16-2000

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 CP
NAME MATISSE, CARL
STREET ADDRESS 20 WHISPERING SANDS DR, S. TOWER UNIT 1206
CITY-ST-ZIP SARASOTA FL 34242

TITLE CP
NAME MATISSE, CARL
STREET ADDRESS 101 WILLOW LAKE DR.
CITY-ST-ZIP PALM DESERT, CA. 92260 ☒ Change ☐ Addition

TITLE VCVT
NAME MATISSE, ELIZABETH
STREET ADDRESS 20 WHISPERING SANDS DR, S. TOWER UNIT 1206
CITY-ST-ZIP SARASOTA FL 34242

TITLE VCVT
NAME MATISSE, ELIZABETH
STREET ADDRESS 101 WILLOW LAKE DR.
CITY-ST-ZIP PALM DESERT, CA. 92260 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 reports 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

Date

Daytime Phone #

4-15-00

(760) 773-0605

CR2E034 19/99