

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

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90096 050 ***150.00

DOCUMENT #

1. Entity Name

BETTER BAGEL BAKERY INC

DO NOT WRITE IN THIS SPACE

B0051401

2. Principal Place of Business

4854 S. TAMMAM, TR

Suite, Apt. #, etc.

SARASOTA FLORIDA

City & State

3. Mailing Address

4631 HAMLETS GROVE DR

Suite, Apt. #, etc.

SARASOTA FLORIDA

City & State

4. FEI Number

59-2568796

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

J.P. KROLL

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

4631 HAMLETS GROVE DRIVE

City

SARASOTA

FL

Zip Code

34235

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IN THIS SPACE**

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

**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

PRESIDENT, SEC, TREAS.

J.P. KROLL

4631 HAMLETS GROVE DRIVE

SARASOTA FL 34235

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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:

J.P. KROLL PRES

3 11 02

941.355.1647

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)