

2001 UNIFORM BUSINESS REPORT (UBR)

0016621 AF

DOCUMENT # **L00020010589**

1. Entity Name
YUM YUM CREATIONS, LLC

FILED

2001 MAY -2 AM 11:23

**DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1901 ELK SPRING DRIVE BRANDON FL 33511	Mailing Address 1901 ELK SPRING DRIVE BRANDON FL 33511
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2. Principal Place of Business 210 South Kings Ave.	3. Mailing Address
Suite, Apt. #, etc. 15	Suite, Apt. #, etc.
City & State Brandon, Florida	City & State
Zip 33511	Country Hillsborough

4. FEI Number 59-3669396	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**ESPINAL, CRISTHIAN
1901 ELK SPRING DRIVE
BRANDON FL 33511**

7. Name and Address of New Registered Agent

Name
ESPINAL, CRISTHIAN

Street Address (P.O. Box Number is Not Acceptable)
210 South Kings Ave STE 15

City
Brandon

FL Zip Code
33511

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 **CRISTHIAN ESPINAL** *[Signature]* **4/28/01**

Signature, typed or printed name of registered agent and title if applicable. (NOT: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" 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

**CEO
DEBORAH NERYS-VIERA
1901 ELK SPRING DR
BRANDON, FL 33511**

**PRESIDENT
CRISTHIAN ESPINAL
1901 ELK SPRING DR
BRANDON, FL 33511**

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*******55.00 *****55.00**

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* **CRISTHIAN ESPINAL** **4/28/01** **813-654-9088**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (11/00)