

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Sep 29, 2004 8:00 am**  
**Secretary of State**

09-29-2004 90001 045 \*\*\*150.00

**DOCUMENT # M01266**

1. Entity Name  
**FRUIT AND JUICE BAR OF STRAWBERRY FIELDS, INC.**



Principal Place of Business  
**% LARY J. BUDNICK  
1316 MADISON ST  
HOLLYWOOD, FL 33019**

Mailing Address  
**% LARY J. BUDNICK  
1316 MADISON ST  
HOLLYWOOD, FL 33019**

**54073560**



09232004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2760350**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**BUDNICK, LARY J.  
1316 MADISON ST  
HOLLYWOOD, FL 33019**

**DO NOT WRITE  
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VS  
BUDNICK, LARY  
1316 MADISON ST.  
HOLLYWOOD, FL**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

*Lary J. Budnick*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**9/23/04 (954) 347 6747**

Date

Daytime Phone #

Attachment  
MO1266  
TO - FL. Div of CORPS : 54073560 9/23/04  
From - LARY Budnick, (954)347-6747

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Please find Enclosed 3 Seperate corps  
w/ \$150.00 check attached.

I never received The Report AND ENDED UP  
getting it OFF your website - (Great site - no problem)

I travel from APRIL TO OCT for work AND  
still haven't got all my mail. Lost checks too.

Thanks for your understanding AND for the  
extension during Hurricane season. You guys are  
really nice to do this!!

Call me for any concerns - (954)347-6747 !

Gratefully,

Lary J. Budnick

  
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