

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

DOCUMENT # N02000009384

1. Entity Name

BRUNO ENTERPRISES, INC.



03-20-2003 90390 001 *****8.75

03-20-2003 90390 002 *****61.25

Principal Place of Business

943 NW 65TH ST
MIAMI FL 33150

Mailing Address

943 NW 65TH ST
MIAMI FL 33150

2. Principal Place of Business

11550 S.W. 81st Terrace

3. Mailing Address

11550 S.W. 81st Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

Zip

33173

Country

USA

Zip

33173

Country

USA

4. FEI Number

51-0437184

☒ Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

THOMPSON, MARY P
943 NW 65TH ST
MIAMI FL 33150

7. Name and Address of New Registered Agent

Name **BRUNO, Theresa M.**

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

11550 S.W. 81st Terrace

City **MIAMI**

FL

Zip Code **33173**

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

Theresa M Bruno

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-11-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	BRUNO, THERESA	
STREET ADDRESS	11550 SW 81ST TERR	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE	DS	<input type="checkbox"/> Delete
NAME	HEPBURN, FLORETT M	
STREET ADDRESS	11160 SW 176TH ST	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	DT	<input type="checkbox"/> Delete
NAME	HALLPIKE, META	
STREET ADDRESS	11300 SW 154TH ST	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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 617, 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:

Theresa M Bruno, President

3-11-03 279-7396

CR2E037 (10/02)