

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2002 8:00 am
Secretary of State

01-29-2002 90053 032 ***150.00

DOCUMENT # P00000004751

1. Entity Name
DAVID'S IN THE COURTYARD, INC.

Principal Place of Business

5290 HIATUS RD.
SUNRISE FL 33351

Mailing Address

5290 HIATUS RD.
SUNRISE FL 33351

2. Principal Place of Business

23A SW OSCEOLA ST
 Suite, Apt. #, etc.

3. Mailing Address

23A SW OSCEOLA ST
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
STUART FL

Zip
34994

Country
USA

City & State
STUART FL

Zip
34994

Country
USA

4. FEI Number **65-0974546**

Applied For
☐ **Not Applicable**

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

- 6. Name and Address of Current Registered Agent

DAVIS, JAMES R
5290 HIATUS RD.
SUNRISE FL 33351

7. Name and Address of New Registered Agent

Name
FRANCISCO CARLOS OLIVEIRA

Street Address (P.O. Box Number is Not Acceptable)
23A SW OSCEOLA ST

City **STUART** **FL** **Zip Code** **34994**

8. The above named entity certifies this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **FRANCISCO CARLOS OLIVEIRA** **01-11-02**

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) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
DAVIS, JAMES R
5290 HIATUS RD
SUNRISE FL 33331 ☒ **Delete**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ **Delete**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ **Delete**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ **Delete**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ **Delete**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ **Delete**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
FRANCISCO CARLOS OLIVEIRA ☒ **Change** ☐ **Addition**
23A SW OSCEOLA STREET
STUART - FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE PRESIDENT
ADRIANA OLIVEIRA ☐ **Change** ☒ **Addition**
23A SW OSCEOLA STREET
STUART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY
Joseph Cordaro ☐ **Change** ☒ **Addition**
23A SW OSCEOLA STREET
STUART, FL 34994

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

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

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 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 Block 12 if changed, or on an attachment with an address with another like empowered.

SIGNATURE: **FRANCISCO CARLOS OLIVEIRA, President** **01-11-02**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)