

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 18, 2001 8:00 am
Secretary of State

09-18-2001 90011 002 ***558.75

0046444 AV

DOCUMENT # P00000007462

1. Entity Name
CUTIE PIES, INC.

LA

Principal Place of Business
3967 194TH TRAIL
NORTH MIAMI BEACH FL 33160

Mailing Address
3967 194TH TRAIL
NORTH MIAMI BEACH FL 33160



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3952 194 TRAIL
 Suite, Apt. #, etc.

3. Mailing Address
3952 194 TRAIL
 Suite, Apt. #, etc.

City & State
N. MIAMI BCH FL
 Zip
33160 Country
DADE

City & State
N. MIAMI BCH FL
 Zip
33160 Country
DADE

4. FEI Number
65-1045291 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

DIAMOND, KEITH D
46 SW FIRST STREET FOURTH FLOOR
MIAMI FL 33130
3952 194 TRAIL
N. MIAMI BCH FL

7. Name and Address of New Registered Agent

Name
IVONNE GOLDBSTEIN
 Street Address (P.O. Box Number is Not Acceptable)
3952 194 TRAIL
N. MIAMI BCH FL
 City
FL Zip Code

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]** (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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 PRES	<input type="checkbox"/> Delete
NAME EIDELSTEIN, MICHELLE	
STREET ADDRESS 3967 194TH TRAIL	
CITY-ST-ZIP NORTH MIAMI BEACH FL 33160	
TITLE V/P	<input type="checkbox"/> Delete
NAME EIDELSTEIN, MICHELLE	
STREET ADDRESS 3967 194TH TRAIL	
CITY-ST-ZIP NORTH MIAMI BEACH FL 33160	
TITLE SECRET	<input type="checkbox"/> Delete
NAME JUDITH GOLDBSTEIN	
STREET ADDRESS 3952 194 TRAIL	
CITY-ST-ZIP N. MIAMI BCH FL 33160	
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	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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	

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 all other like empowered.

SIGNATURE: **[Signature]**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **8/23/01** Daytime Phone #

CR2034 (5/01)



Attachment
979399

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 31, 2001

CUTIE PIES, INC.
3967 194TH TRAIL
NORTH MIAMI BEACH, FL 33160

SUBJECT: CUTIE PIES, INC.
Ref. Number: P00000007462

We have received your document for CUTIE PIES, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

We are unable to waive or reduce the late fee. The corporation received the corporate annual report/uniform business report and notice that failure to file the report by May 1 would result in a \$400.00 late fee.

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Kathy Ashton
Document Specialist

Letter Number: 801A00049590