

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 17, 2001 8:00 am**  
**Secretary of State**

04-27-2001 90358 019 \*\*\*158.75

**DOCUMENT # P00000037376**

**1. Entity Name**  
**NATIONAL CAFE OF CENTRAL FLORIDA, INC.**

**Principal Place of Business**

**12667 MARIBOU CIRCLE**  
**ORLANDO FL 32828**

**Mailing Address**

**12667 MARIBOU CIRCLE**  
**ORLANDO FL 32828**

**78374**



DO NOT WRITE IN THIS SPACE

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number**

**59-3639097**

Applied For

Not Applicable

Zip

Country

Zip

Country

**5. Certificate of Status Desired**

☐

**\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**REIDINGER, MANFRED**  
**12667 MARIBOU CIRCLE**  
**ORLANDO FL 32828**

Name

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

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, 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 \$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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **D** ☐ Delete  
**NAME** **REIDINGER, MANFRED**  
**STREET ADDRESS** **12667 MARIBOU CIRCLE**  
**CITY-ST-ZIP** **ORLANDO FL 32828**

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

**TITLE** **D** ☒ Delete  
**NAME** **DEVEREAUX, ROBERT P**  
**STREET ADDRESS** **630 MAIN STREET**  
**CITY-ST-ZIP** **SEWELL NJ 08080**

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

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

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

**TITLE** ☐ Delete  
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**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

09-12-2001 407-2560347

CP2E034 (5/01)



# Custom Business Checking

01 2000006516088 031 140 1 36 30,416

Attachment Doc# P000000037376



NATIONAL CAFE OF CENTRAL FLORIDA INC  
12667 MARIBOU CIRCLE  
ORLANDO FL 32828

CB

78374

## Custom Business Checking

5/01/2001 thru 5/31/2001

Account number: 2000006516088  
Account holder(s): NATIONAL CAFE OF CENTRAL FLORIDA INC

Taxpayer ID Number: 593639097

### Account Summary

Opening balance 5/01	\$262.12
Deposits and other credits	523.40 +
Checks	158.75
Closing balance 5/31	\$626.77

### Deposits and Other Credits

Date	Amount	Description
5/31	523.40	DEPOSIT
<b>Total</b>	<b>\$523.40</b>	

### Checks

Number	Amount	Date	Number	Amount	Date	Number	Amount	Date
1004	158.75	5/03	<b>Total</b>	<b>\$158.75</b>				

### Daily Balance Summary

Dates	Amount	Dates	Amount	Dates	Amount
5/03	103.37	5/31	626.77		

150  
+ 8.75  
158.75

The check was made  
Department of State  
Date 04-23-2001

Please don't hesitate to ask for a  
copy of the check. The Bank can  
easily supply it.

Mike  
Mike W. P. [Signature]