

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000057944

1. Entity Name

THE CYPRESS GRILL, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90374 045 ***150.00

Principal Place of Business

6500 NW 12TH AVENUE SUITE 101
FORT LAUDERDALE FL 33309

Mailing Address

6500 NW 12TH AVENUE SUITE 101
FORT LAUDERDALE FL 33309

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-1016496

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LUCERI, FRANK A ESQ
~~G/O FRIED & LUCERI, P.A.~~
~~1975 EAST SUNRISE BLVD SUITE 604~~
~~FT LAUDERDALE FL 33304~~

7. Name and Address of New Registered Agent

Name Luceri, Frank A., Esq.

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

c/o Frank A. Luceri, P.A.

225 NE Mizner Blvd., Suite 300

City

Boca Raton,

FL

Zip Code

33432

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

4/23/01

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, 2001 Fee will be \$550.00
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 D ☐ Delete
NAME LUCERI, GENEVIEVE
STREET ADDRESS 6500 NW 12TH AVENUE SUITE 101
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE D ☐ Delete
NAME CONTI, RICHARD
STREET ADDRESS 6500 NW 12TH AVENUE SUITE 101
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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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 empowerments.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Genevieve Luceri Director 4/23/01 (954) 771-6188

CR2E034 (10/00)