## 5/5 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P0000060690 1. Entity Name FRESSER'S PIZZA & PASTA INC. Principal Place of Business Mailing Address 3327 EAST OAKLAND PARK BLVD 3327 EAST OAKLAND PARK BLVD FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308 2. Principal Place of Business 3327 E. Oakland PARK Glud. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 6. Name and Address of Current Registered Agent ZUCKER BURTON, KAREN R Street Address (P.C 3327 EAST OAKLAND PARK BLVD FORT LAUDERDALE FL 33308 8. The above named entity submits this statement for the purpose of changing its registered office or registered Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required wh FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. TITLE TITLE KESIDENT KARZII R. ZUCKZE BULTON 3327 E. DACIMO PARK BUR BUCINDANDNE R. 33308 MAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP

(DOSSCOOK) 3ndl)

3500 9m. Oc=mi Dr #117

HILE

NAME

FILED May 29, 2001 8:00 am Secretary of State

05-05-2001 90833 010 \*\*\*150.00

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DO NOT WRITE	IN THIS	SPACE	Ē		
FEI Number 10183	94		Not	olied For Applicable	
i. Certificate of Status Desired			5 Addi leguired		
. Name and Address of New Reg	gistered	Agent			1
			-		
). Box Number is Not Acceptable)					
	F	_ Z	ip Code		
agent, or both, in the State of Flori	da.				
on reinstating)	DATE				
10. Election Campaign Final Trust Fund Contribution.				May Be to Fees	
ADDITIONS/CHANGES TO OFFIC	ERS AN	D DIRE	CTORS	IN 11	1
			Change	☐ Addition	CR2E034 (10/00)
			Change	Addition	CRO
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STREET ADDRESS CITY-ST-ZIP	1000 ALL OK=247 DS #114	STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition
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13. I hereby indicated	certify that the information supplied with this filing does not qualify for to on this report or supplemental report is true and accurate and that my	signature shall have the sar	me legal effect as if made under oath; that I am an officer of	or director

CITY-ST-7iP

TITLE

SIGNATURE: