

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91759 016 ***150.00

**2003 FOR PROFIT CORPORATION/
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000067383

1. Entity Name
LIL'S GOURMET, INC.



90128185

Principal Place of Business
**14741 SUNSET LANE
FT LAUDERDALE, FL 33330**

Mailing Address
**14741 SUNSET LANE
FT LAUDERDALE, FL 33330**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
85-1058024

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**CHIN, LILLA
14741 SUNSET LANE
FT LAUDERDALE, FL 33330**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and UBR if applicable

(If SE: Registered Agent Signature required when filing)

DATE



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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
CHIN, LILLA
14741 SUNSET LANE
FT LAUDERDALE, FL 33330**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
CHIN, DENNIS
14741 SUNSET LANE
FORT LAUDERDALE, FL 33330**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like information.

SIGNATURE:

Lilla Chin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/03
Date

Daytime Phone #

CH2EC034 (10/02)