05-23-2002 90070 020 ***150.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

659881

01162

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000072233

1. Entity Name

AL FORNO FOOD SERVICES V, INC.

DO NOT WRITE IN THIS SPACE

04-30-01 90372 002 $150.00
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
6971 WEST BROWARD BLVD.	6971 WEST BROWARD BLVD.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PLANTATION, FLORIDA	City & State: PLANTATION, FLORIDA
Zip: 33317 Country:	Zip: 33317 Country:

4. FEI Number: 65-0941624 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: WALTER OLIVA

Street Address (P.O. Box Number is Not Acceptable): 1389 HARBORSIDE DRIVE

City: WESTON FL Zip Code: 33326

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: Olivia Walter
Signature, type or printed name of registered agent, and title if agent is an officer. (NOTE: Registered agent signature required when mailing) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	DIRECTOR
NAME	OLIVA, WALTER
STREET ADDRESS	1389 HARBORSIDE DRIVE
CITY-ST-ZIP	WESTON, FL 33326
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

$60.00

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Olivia Walter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

attachment # P00000072233/659881

225 n.e. mizner blvd., ste. 250
boca raton, florida 33432

561 394 5100
561 750 9781 fax

www.kaufmanrossin.com

April 29, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Alforno Food Services V, Inc.
EIN#: 65-0941624
Form: UBR-1

Dear Sir or Madam:

KAUFMAN ROSSIN & CO. PROFESSIONAL ASSOCIATION
CERTIFIED PUBLIC ACCOUNTANTS

Please be advised that our client never received the notice indicating the Uniform Business Report that he filed was incorrectly filled out. The company's management relocated to 6971 W. Broward Boulevard in Plantation, Florida during 2001 from 1389 Harbor Side Drive in Weston, Florida. Therefore, we have enclosed for resubmission The Uniform Business Report correctly completed, along with a check in the amount of $150.00. The enclosed check is for the filing fee.

In light of the above information we respectfully request that all penalties and interest be abated and that you find this matter resolved. Please contact the undersigned if you have any questions.

Very truly yours,

Mark Weinstock, CPA

Mark Weinstock, CPA
Kaufman, Rossin & Co.

Enclosure
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