# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**May 12, 2001 8:00 am**
**Secretary of State**
05-12-2001 90008 042 ***150.00

DOCUMENT # P00000086490

1. Entity Name
Agita Restaurant Management Group, Inc.

| Principal Place of Business | Mailing Address |
|---|---|
| 11111 Biscayne Blvd. | 11111 Biscayne Blvd. |
| Miami, Florida 33181 | Miami, Florida 33181 |

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 2250 SW 3rd Ave. | 2250 Southwest 3rd Ave. |
| Suite, Apt. #, etc. 100 | Suite, Apt. #, etc. 100 |
| City & State Miami FL | City & State Miami, FL |
| Zip 33129 / Country USA | Zip 33129 / Country USA |

DO NOT WRITE IN THIS SPACE

4. FEI Number 36-4390116 — Applied For ☐ Not Applicable ☐

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 |
|---|---|
| ~~Howard J. Vogel~~ | Name: Sarino R. Costanzo |
| ~~Bierman, Wolfe, Bennett, Vogel & Manaker, P.A.~~ | Street Address (P.O. Box Number is Not Acceptable): 2250 Southwest 3rd Ave. |
| ~~100 SE 2 Street, Suite 3500~~ | Ste. 100 |
| ~~Miami, Florida 33131~~ | City: Miami FL Zip: 33129 |

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 Sarino R. Costanzo
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE APR 27 2001

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 | | 12. ADDITIONS/ CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|---|---|
| TITLE<br>NAME<br>STREET<br>ADDRESS<br>CITY-ST-ZIP | **DPST**<br>Nicholas A. Mazzio<br>11111 Biscayne Blvd.<br>Miami, Florida 33181<br>☐ Delete | TITLE<br>NAME<br>STREET<br>ADDRESS<br>CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE<br>NAME<br>STREET<br>ADDRESS<br>CITY-ST-ZIP | ☐ Delete | TITLE<br>NAME<br>STREET<br>ADDRESS<br>CITY-ST-ZIP | ☐ Change ☐ Addition |
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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** Nicholas A. Mazzio, Secretary 4/26/01 630-697-6200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #