

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000098954

1. Entity Name

THE WORLD DELI PAN CORP.

**FILED**  
Aug 08, 2001 8:00 am  
Secretary of State

08-08-2001 90007 034 \*\*\*158.75

|                                                                                    |         |                                                                    |         |
|------------------------------------------------------------------------------------|---------|--------------------------------------------------------------------|---------|
| Principal Place of Business<br><b>12758 SW 88 STREET<br/>MIAMI, FL 33186</b>       |         | Mailing Address<br><b>12758 SW 88 STREET<br/>MIAMI, FL 33186</b>   |         |
| 2. Principal Place of Business<br><b>12758 SW 88 STREET</b><br>Suite, Apt. #, etc. |         | 3. Mailing Address<br>Suite, Apt. #, etc.                          |         |
| City & State<br><b>MIAMI, FLORIDA</b>                                              |         | City & State                                                       |         |
| Zip<br><b>33186</b>                                                                | Country | Zip                                                                | Country |
| 4. FEI Number<br><b>65-1048817</b>                                                 |         | Applied For<br>Not Applicable                                      |         |
| 5. Certificate of Status Desired                                                   |         | <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |         |

80061667

DO NOT WRITE IN THIS SPACE

|                                                                                                                    |  |                                                                                                                                         |  |
|--------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------|--|
| 6. Name and Address of Current Registered Agent<br><b>CARMELO ALVAREZ<br/>16602 SW 96 TERR<br/>MIAMI, FL 33196</b> |  | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><b>FL</b> 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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

07/22/01

DATE

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, 2000 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 ADDRESS<br>CITY-ST-ZIP | <b>PD<br/>CARMELO ALVAREZ<br/>16602 96 TERR<br/>MIAMI, FL 33196</b> <input type="checkbox"/> Delete               | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>RICARDO BEILMANN<br/>16602 SW 96 TERR<br/>MIAMI, FL 33196</b> <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>D<br/>ZORAIDA GREIGER<br/>16602 SW 96 TERR<br/>MIAMI, FL 33196</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>MAURICIO ALTAVILLA<br/>16602 SW 96 TERR<br/>MIAMI, FL 33196</b> <input type="checkbox"/> Delete          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete                                                                                   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete                                                                                   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete                                                                                   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                  |

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:

PRESIDENT

07/22/01

CR2E034 (9/99)

Attachment  
OH# P000000098954  
B0061667

**THE WORLD DELI PAN CORP.**  
12758 SW 88 STREET  
Miami, Fl 33186

July 22, 2001

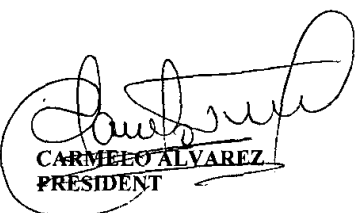
FLORIDA DEPARTMENT OF STATE  
RE: DOCUMENT #P00000098954  
FEI # 65-1048817

TO WHOM IT MAY CONCERN:

WE ARE SENDING OUR REINSTATEMENT REPORT, BECAUSE WE NEVER RECEIVED ORIGINAL ANNUAL REPORT, WE WILL APPRECIATE IF YOU WAIVE THE LATE CHARGES.

ATTACHED IS THE REINSTATEMENT APPLICATION WITH A CHECK IN THE AMOUNT OF \$158.75 FOR THE YEARS 2001.

SINCERELY YOURS

  
CARMELO ALVAREZ  
PRESIDENT