

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Aug 07, 2001 8:00 am
Secretary of State

08-07-2001 90013 012 ***150.00

DOCUMENT # P00000099197

1. Entity Name

MARGATE RIB CORP.

Principal Place of Business

**7372 W. ATLANTIC BLVD.
MARGATE FL 33063**

Mailing Address

**7372 W. ATLANTIC BLVD.
MARGATE FL 33063**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65 105 8538

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**MURPHY, WILL
10800 BISCAYNE BLVD.
SUITE 900
NORTH MIAMI FL 33161**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE **D** ☒ Delete
NAME **STEVENS, SHARI**
STREET ADDRESS **7372 W ATLANTIC BLVD**
CITY-ST-ZIP **MARGATE FL**TITLE **PD** ☐ Delete
NAME **GALGANO, LISA**
STREET ADDRESS **7372 W. ATLANTIC BLVD.**
CITY-ST-ZIP **MARGATE FL 33063**TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**8/1/01 (954) 452-7424**
Date Daytime Phone #

CR2E034 (5/01)

Attachments

**Bobby
Rubino's**
PLACE FOR RIBS®

#100000099197
774438

August 1, 2001

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

To Whom it may concern:

I am writing to inform you that I never received a 2001 Uniform Business Report for Margate Rib Corp. I recently received a copy of a second report stating that I owe \$550.00.

Enclosed is a check for \$150.00, since I never received the first report. I hope you can understand my situation and could possibly waive the \$400.00 late fee.

If you have any questions, I can be reached at (954)452-7424.

Sincerely,



Lisa Galgano