

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000104997

1. Entity Name

BISTRO BOCA, INC.

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90084 044 ***150.00

Principal Place of Business

4000 N FEDERAL HWY STE 201
BOCA RATON FL 33431

Mailing Address

4000 N FEDERAL HWY STE 201
BOCA RATON FL 33431

2. Principal Place of Business

Bistro Boca

3. Mailing Address

Martin Kartagener

Suite, Apt. #, etc.

3011 Yamato Road Ste A-19

Suite, Apt. #, etc.

7001 E Cypresshead Drive

City & State

Boca Raton, FL

City & State

Parkland, FL

Zip

33434

Country

Palm Beach

Zip

33067

Country

Boca Raton

4. FEL Number

65-1053812

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEVINE, JEFFREY A
4000 N FEDERAL HWY STE 201
BOCA RATON FL 33431

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 \$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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KARTAGENER, MARTIN
7001 EAST CYPRESSHEAD DRIVE
PARKLAND FL 33067 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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CITY-ST-ZIP
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TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Martin Kartagener
7001 E Cypresshead Drive
Parkland, FL 33067 ☐ Change ☒ Addition

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

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

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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR.

Date

Daytime Phone #

4-19-01 (954) 755-7406

CR2E034 (10/00)